

COUNTY BOROUGH OF BURNLEY.

LOCAL SANITARY AUTHORITY.

Report on the Public Health and Sanitary Administration for the Year 1934.

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Administrative Tuberculosis Officer,
Medical Superintendent,
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Medical Superintendent,
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MICC M EEDNIHOUGH #

Health Visitors, Tuberculos Dental and Orthopædic Nurses		MISS M. FERNIHOUGH † MISS L. R. FIRTH MISS S. HEAP † MISS S. JACKSON † MRS. A. J. JONES b MISS L. G. MOORE † c MISS G. WILLIAMS † c MRS. H. REEVES † MRS. E. HAWORTH † MISS M. L. CRITCHLOW* (Resigned June, 1934). MISS W. COOPER* (Appointed June, 1934)
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Matron, Bank Hall Maternity an Hospital	nd Children's	MISS M. C. WALKER#‡
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Municipal General Hospital		R. NEWLOVE (Clerk Steward). F. TURNER. E. W. TURNER.
†Certified Sanitary Inspector. aMeat and other Food Certifical Certificate of C.M.B. SMaternity and Child Welfare State Registered Nurse.		bHealth Visitor's Certificate. cHealth Visitor's Certificate—R.S.I. *Certificate—Chartered Society Massage Medical Gymnastics and Medical Electricity.
School Medical; Ophthalmic Surgeon and Nose Specialist		T. SNOWBALL, M.A., M.B., CH.B.
MATERNITY AND CHILD WELFAR BANK HALL MATERNITY HOSPIT Consulting Obstetrician Anæsthetist Consultant under the Puerpera	E: AL: 	A. CALLAM, D.S.O., M.D., F.R.C.S.E. A. C. GLASHAN, M.B., Ch.B.
-		A. CALLAM, D.S.O., M.D., F.R.C.S.E.
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Consulting Dental Surgeon		(D. SKINNER, M.B., CH.B. T. JACKSON, L.D.S.
Public Assistance:		(I HAWODEN AND A D
District Medical Officer unde Law Acts and Public Vaccinat		(J. HAWORTH, M.B., CH.B. (D. A. KER, M.B., CH.B.

Summary of Statistics. 1.—GENERAL STATISTICS.

,		•••				4686 acres.
Area fully developed, or in course of develop	ment		• • •	•••	• • •	2093 acres.
Enumerated Population (Census 1931)	•••	•••		•••	• • •	98,258
Registrar General's Estimate of Population,				•••	• • •	94,300
Density of Population, i.e., Number of Person		Acre (w	hole	boroug.	h)	20.1
Number of Houses in Borough, December, 1			•••			28,037
Number of Inhabited Houses (end of 1934) a	eccordi	ng to Ra	ate L	Books		27,710
Number of New Houses erected in 1934				•••	• • •	423
Rateable Value (April, 1935)	• • • •			•••	•••	£556,883
Sum Represented by a Penny Rate (April, 1	935)				•••	£2,124
Amount of Poor Law (Out-door) Relief Paid	in 193	4				£49,816
2.—EXTRACTS FRO	M VIT	AL ST	AT19	STICS.		
					1934	1933
		M.		F.	Total	
Live Births: Legitimate		559		504	1,063	
Illegitimate		19		28	47	
		578		532	1,110	1,165
Rate per 1,000 of estimated resident 1	ooulat	ion			11.77	12.15
Stillbirths: Legitimate		26	•••	30	56	12 10
Illegitimate		_		1	1	
inogicinate iii iii iii		_		_		_
		26		31	57	59
		_		_	_	
Rate per 1,000 total (live and still) bi	rths				48-1	48.2
Number of Deaths (Males 634, Females 640)					1,274	1,425
Trumber of Deaths (males off, I chales off)						
					-	
Crude-Death Rate per 1,000 of estimated res	ident p	opulatio	on	•••	13.51	14.86
Crude-Death Rate per 1,000 of estimated res Death Rate as adjusted by Registrar Genera	ident p l's C.F	opulatio . figures	on	•••	-	
Crude-Death Rate per 1,000 of estimated res Death Rate as adjusted by Registrar Genera Deaths from Puerperal Causes (R.G's. Short	ident p l's C.F List)—	opulation figures	on (1:0	8)	13·51 14·58	14·86 16·05
Crude-Death Rate per 1,000 of estimated res Death Rate as adjusted by Registrar Genera Deaths from Puerperal Causes (R.G's. Short Dea	ident p l's C.F List)— ths. l	oopulatio . figures - Rate per	on (1:0 : 1,00	 8) 00 total	13·51 14·58 live and	$\begin{array}{c} 14.86 \\ 16.05 \end{array}$ still births—
Crude-Death Rate per 1,000 of estimated res Death Rate as adjusted by Registrar Genera Deaths from Puerperal Causes (R.G's. Short Dea Number 29. Puerperal Sepsis	ident p l's C.F List)— ths. 1	oopulation oopulation of the second contract	on (1:0 : 1,00 	 8) 00 total 	13·51 14·58 live and 3·43	14.86 16.05 still births— 4.08
Crude-Death Rate per 1,000 of estimated res Death Rate as adjusted by Registrar Genera Deaths from Puerperal Causes (R.G's. Short Dea	ident p l's C.F List)— ths. 1 4 13	oopulatio . figures - Rate per	on (1:0 : 1,00	 8) 00 total	13·51 14·58 live and	$\begin{array}{c} 14.86 \\ 16.05 \end{array}$ still births—
Crude-Death Rate per 1,000 of estimated res Death Rate as adjusted by Registrar Genera Deaths from Puerperal Causes (R.G's. Short Dea Number 29. Puerperal Sepsis Number 30. Other Puerperal causes	ident p l's C.F List)— ths. 1 4 13	oopulation oopulation of the second of the s	on (1:0 : 1,00 	 8) 00 total 	13·51 14·58 live and 3·43 11·14	14·86 16·05 still births— 4·08 2·45
Crude-Death Rate per 1,000 of estimated res Death Rate as adjusted by Registrar Genera Deaths from Puerperal Causes (R.G's. Short Dea Number 29. Puerperal Sepsis	ident p l's C.F List)— ths. 1 4 13	oopulation oopulation of the second contract	on (1:0 : 1,00 	 8) 00 total 	13·51 14·58 live and 3·43	14.86 16.05 still births— 4.08
Crude-Death Rate per 1,000 of estimated rest Death Rate as adjusted by Registrar General Deaths from Puerperal Causes (R.G's. Short Deaths from Puerperal Causes (R.G's. Short Deaths From Puerperal Sepsis Number 30. Other Puerperal causes Total	ident p l's C.F List)— ths. 1 4 13 — 17	oopulatio . figures - Rate per 	on (1:0 :: 1,00 	 8) 00 total 	13·51 14·58 live and 3·43 11·14 —————————————————————————————————	$ \begin{array}{r} 14.86 \\ 16.05 \\ \hline $
Crude-Death Rate per 1,000 of estimated responsible to the Death Rate as adjusted by Registrar General Deaths from Puerperal Causes (R.G's. Short Deaths from Puerperal Sepsis Number 29. Puerperal Sepsis Number 30. Other Puerperal causes Total	ident p l's C.F List)— ths. 1 4 13 — 17 — f age	oopulation oopulation of the second of the s	on (1:0 : 1,00 	 8) 00 total 	13·51 14·58 live and 3·43 11·14	14·86 16·05 still births— 4·08 2·45
Crude-Death Rate per 1,000 of estimated rest Death Rate as adjusted by Registrar General Deaths from Puerperal Causes (R.G's. Short Deaths from Puerperal Causes (R.G's. Short Deaths From Puerperal Sepsis Number 30. Other Puerperal causes Total	ident p l's C.F List)— ths. 1 4 13 — 17 — f age	oopulatio . figures - Rate per 	on (1:0 :: 1,00 	 8) 00 total 	13·51 14·58 live and 3·43 11·14 —————————————————————————————————	$ \begin{array}{r} 14.86 \\ 16.05 \\ \hline $
Crude-Death Rate per 1,000 of estimated responsible to the Death Rate as adjusted by Registrar General Deaths from Puerperal Causes (R.G's. Short Deaths from Puerperal Sepsis Number 29. Puerperal Sepsis Number 30. Other Puerperal causes Total	ident p l's C.F List)— ths. 1 4 13 — 17 — f age	oopulatio . figures - Rate per 	on (1:0 :: 1,00 	 8) 00 total 	13·51 14·58 live and 3·43 11·14 —————————————————————————————————	$ \begin{array}{r} 14.86 \\ 16.05 \\ \hline $
Crude-Death Rate per 1,000 of estimated respective Death Rate as adjusted by Registrar General Deaths from Puerperal Causes (R.G's. Short Deaths from Puerperal Sepsis Number 29. Puerperal Sepsis Number 30. Other Puerperal causes Total	ident properties identification in the control of t	oopulation oopulation oopulation of the figures of the first of the first oop oop oop oop oop oop oop oop oop oo	on (1:0 : 1,00 	 8) 00 total 	13·51 14·58 live and 3·43 11·14 —————————————————————————————————	14·86 16·05 still births— 4·08 2·45 ————————————————————————————————————
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Public Health Department, Burnley,

May, 1935.

MR. MAYOR, LADIES AND GENTLEMEN,

I have the honour to present to you my fourth Annual Report on the health of Burnley and on the work of the Public Health Department for the year 1934. The contents of the report have been compiled in compliance with Circular 1417 of the Ministry of Health.

The birth rate continues to fall. The rate for 1934 is 11.7 per 1,000 of the estimated population and is the lowest recorded in the borough. The birth rate of Burnley is now considerably lower than that of the Country as a whole and of the average birth rate of the great towns.

The death rate of infants under one year of age is 70·3 per 1,000 live births, and the lowest recorded in the borough.

The crude death rate is 13.5, which is less than that of the previous year.

In comparing the death rate of Burnley with that of the whole country or other areas, an adjustment must be made according to the sex and age components of the population. For this purpose the Registrar General has adopted the average mortality rates experienced in England and Wales during the three years 1930-32 divided into 11 sex-age groups as a standard and has applied them to every area in the country. The ratio of the resulting death rate for the national 1931 census population to the similarly obtained hypothetical death rate of a given area provides an adjusting factor, which may be said to represent the population handicap to be applied to the area. This comparability factor may be used for practical purposes until fresh population constitutions are available at the next census. When it is multiplied by the crude death rate experienced in an area, it modifies the latter so as to make it comparable with the crude death rate of the country as a whole or with the similarly adjusted death rate for any other area.

The application of this adjusting factor to the crude death rate (13.5) of Burnley gives an adjusted death rate of 14.58 for the borough. The ratio of the local crude death rate to the national death rate is 1.14, but the similar

ratio of the adjusted death rate is $1\cdot 23$. In other words the mortality of Burnley in 1934 appears (according to the crude death rate) to be 14% above the national average, whereas by the adjusted comparison it is seen to be 23% above the national average. Therefore age for age and sex for sex the death rate in Burnley is 23% above the average for the whole country.

1934 was a disastrous year in respect of deaths connected with child bearing. Despite the improved facilities for care and treatment during pregnancy and confinement, the mortality was more than double that of any of the previous nine years. Several of the maternal deaths might possibly have been prevented had the women accepted guidance and advice offered to them immediately danger signals appeared. There is no evidence to suggest that poverty or malnutrition were predominating factors contributing to a fatal termination.

In the Occupational Section of the 1931 Census Report, which was published last year, interesting light is thrown on the occupations of the inhabitants. The occupations of persons aged 14 years and over show that in 1931, 9,319 males, or $27\cdot4\%$ of the males having occupations, were workers in the textile industry. The second largest group is formed of 3,848 males having commercial, finance and insurance occupations. Mining and quarrying form the occupations of 2,830 men and 2,522 have occupations connected with transport and communications.

18,769 females are textile workers; they form 72·4% of the 25,931 females having occupations. A further 825 are engaged in the making up of textile goods and articles of dress. 2,314 women have occupations such as domestic service, waitresses, laundry workers, etc.

Apart from the accepted prevalence of respiratory and rheumatic affections found amongst textile workers, there does not appear to be any undue morbidity or mortality directly related to any one of the commoner occupations of the inhabitants; and judging by the spectacular diminution of the death rate from respiratory diseases in the present century, and allowing for the decrease in the numbers employed, workers in textile processes would appear to suffer less severely from respiratory affections now than formerly.

Of the infectious diseases, scarlet fever and diphtheria predominated. The latter manifested itself, during the last quarter of the year, in a localised but severe epidemic. The incidence of other infectious diseases was slight.

The Municipal General Hospital has now been administered as an "appropriated" institution for two years. The amount of surgical work carried out has increased beyond expectation and would have been greater had not

the Victoria Hospital Board of Management reduced the number of patients transferred to the Municipal Hospital under the scheme of co-operation. Preliminary plans of the lay-out for a new children's ward, operating theatre unit and X-Ray department have been prepared and are now under consideration.

Inspections of Slum Clearance Areas and subsequent representations have added considerably to the work of the Health Department, in an endeavour to keep abreast with the five-year housing programme.

May I tender my thanks to the Chairmen and Members of the various Committees for the kindly support and interest they have taken in the work of the Department.

The staff have rendered conscientious service throughout the year.

I am,

Your obedient Servant,

D. C. LAMONT,

Medical Officer of Health.

REPORT.

Section 1.

Statistics and Social Conditions of the Area.

Area and Population.

According to the Census Report of 1931, the Borough is 4,686 acres in area. 2,093 acres are fully developed, or in course of actual development.

The Registrar General's estimation of the population at the middle of 1934 is 94,300, which is 3,958 less than the 1931 Census figure. The density of population in the whole borough is 21 persons per acre, but in the developed portion of the borough it is 45 per acre. There are, however, 1,100 acres which are densely developed and occupied by a population of 70,000, or 63 persons to the acre.

In my report for the year 1932, I gave particulars from the 1931 Census of the number of private families, dwellings, and the distribution of the population in dwellings. The largest Census population of the borough was recorded in the 1911 Census, when the population was 106,765. Since that time, the population has decreased steadily until now it is only about four-fifths of what it was in 1911. The population has in fact declined to below that recorded in the 1901 Census.

On the other hand, despite the decline in the population, the number of private families has increased. In the twenty years from 1911 to 1931, although the population had decreased by 8,507, the number of private families had increased by 3,113.

A change has also occurred in the numbers of persons per family. Whereas in 1911, only 9% of the population consisted of persons in families of three persons or less, the percentage had increased to 28% in 1921, and in 1931 it was 38%. Therefore there has been not only an increase in the number of families, but an increase in the proportion of small families.

To house the population of 94,300, there were at the end of 1934, 28,037 structurally separate dwellings. 391 houses were unoccupied, of which 106 were new houses ready for occupation, but not yet tenanted, and 34 were houses vacated in a Clearance Area but not yet demolished. Therefore the average number of persons per occupied house at the end of 1934 was 3·4.

Occupations.

The statistical information compiled by the Registrar General from the 1931 Census returns, giving details of the numbers and sexes of the population employed in various industries and occupations was published during 1934. The following is a summary of the occupations of males and females aged 14 years and over.

Total Occupied Persons Aged 14 Years and Over. Males, 34,029. Females, 25,931.

Unoccupied and Retired Persons Aged 14 Years and Over.
Males, 2,581. Females, 16,866.

OCCUPATIONS OF MALES AND FEMALES AGED 14 YEARS AND OVER.

Occupation.	Males.	Females.
Fishermen	 1	 _
Mining and Quarrying	 2,830	 _
Makers of Brick, Pottery and Glass	 186	 _
Metal Workers (not Electro Plate)	 2,458	 22
Makers of Electrical Apparatus and Electricians	 266	 7
Skin and Leather Workers (not Boots and Shoes)	 47	 3
Makers of Textile Goods and Articles of Dress	 419	 825
Workers in Wood and Furniture	 793	 16
Printers and Photographers	 245	 68
Workers in Mixed or Undefined Materials	 71	 3
Painters and Decorators	 570	 3
Employed in Transport and Communications.	 2,522	 50
Public Administration and Defence (Excluding		
Professional Men, Clerical Staff and Typists)	 209	 4
Personal Service	 958	 2,314
Warehousemen, Storekeepers, etc	 733	 158

Occupation.		Males.		Females.
Undefined Workers		3,910		405
Agricultural Occupations		455		15
Workers in Non-Metalliferous Mine and				
Quarry Products		32		
Chemical Processes. Makers of Paint, Oils, etc.		28	• • •	4
Workers in Precious Metals and Electro Plate		6		3
Makers of Watches, Clocks and Scientific				
Instruments		25		_
Textile Workers		9,319		18,769
Makers of Food, Drinks and Tobacco		427		432
Workers in Paper and Cardboard		99		63
Builders, Bricklayers, Stone and Slate Workers;				
Contractors		1,056		3
Workers in Other Materials		48		17
Commercial, Finance and Insurance Occupations				
(Excluding Clerks)		3,848		1,547
Professional Occupations		608		614
Employed in Entertainments and Sport		186		27
Clerks, Draughtsmen, Typists		1,194		559
Stationary Engine Drivers, Motor Attendants, et	c.	480		_
Retired or not Gainfully Occupied		2,581		16,866

No excessive prevalence of illness related to industrial processes was brought to my notice during 1934.

Baths.

The three Public Baths owned by the Corporation have covered swimming and slipper baths. Within recent years filtration and chlorination plant have been installed in each.

The number of attendances during the year ended 31st March, 1935 was as follows:—

Central Baths, 95,885; Gannow Baths, 59,440; North Street Baths, 64,999. Total, 220,324.

Poor Law Relief.

The total amount of Out-door Relief expended in Burnley during the year was $\pounds49,816$, as compared with $\pounds38,498$ in 1933. The weekly average number of persons in receipt of Out-relief was 3,572 comprising 1,547 cases. There were 547 admissions of Burnley persons to the Primrose Bank (Public Assistance) Institution.

Rateable Value.

The rateable value for the year 1934-35 was £556,883, and the sum represented by a penny rate £2,124.

Unemployment.

The number of applicants on the live register of the Employment Exchange in 1934 averaged 11,901, as compared with 12,333 in 1933 and 12,314 in 1932.

The Manager of the Labour Exchange considers that the employment position during 1934 was slightly better than during 1933, mainly due to an improvement which obtained in the Coal Mining Industry which, so far as the employment position is concerned, was better during 1934 than for many years past. Another less important factor was the good employment position in the building trade.

Health Insurance.

The total number of insured persons in Burnley on the 31st December, 1934, was approximately 49,537, or 52% of the total population. The number of insured persons is 2,626 less than at the corresponding period of the previous year.

The Weather of 1934 compared with 1933.

METEOROLOGICAL OBSERVATIONS AT QUEEN'S PARK.

		1934		1933
Sunshine:	Total	1,103·1 hours		1,205·8 hours
	No. of days with bright sunshine Highest amount in 24	262	•••	279
	hours	14.3 hours		14.8 hours
		on 2nd June		on 5th July
Rainfall:	Total fall	40.09 ins.		33·54 ins.
	No. of days rain	216		181
	Highest amount in a day	1.33 ins.		2.24 ins.
		on 4th October		on 25th February
Temperati	are:—			· ·
Mean	Temperature in shade	48 ⋅ 7 °		48·4°
Mean	Range	12 ⋅5°		12.5°
Mean	of Earth Therm, 1 foot	48 ⋅ 4 °		48·8°
	" 4 feet	48 ⋅ 9 °		$49 \cdot 3^{\circ}$
No. o	f days of ground frost	56		117
Relative F	Iumidity:—			
Mean	•	81.5%		79.5%

The results for the individual months of 1934 compiled from the observations taken at 9 a.m. G.M.T., together with a yearly summary since the Climatological Station at Queen's Park was commenced in 1908, are given in the Appendix to this report.

The amount of atmospheric pollution in the centre of Burnley throughout the year 1933-34 was equivalent to 170 metric tons per square kilometre which, although higher than the amount recorded in the previous year, is only 77% of the average of the previous five years.

The weather throughout 1934, as recorded at the Climatological Station, may be described as generally mild, dull and wet. There were $6\frac{1}{2}$ inches more rain, 35 more rainy days and 17 fewer days of bright sunshine than in the previous year.

The lack of bright sunshine in Burnley is noteworthy and will tend to affect adversely the general physique of the population, particularly children. There are 250 stations throughout the British Isles in which the amount of bright sunshine is recorded. During the previous few years Burnley was fifth in order of lowest sunshine value. In 1934 it was tenth from the bottom of the list, the only districts having less sunshine being a part of Manchester and districts on the West Coast and North of Scotland.

There were 216 days on which rain fell during 1934, as compared with an average of 213 rainy days for the previous 26 years. The total rainfall in Burnley during 1934 was 1,002·3 m.m., as compared with an average of 1,091·2 m.m. for the previous 26 years. The amount of sunshine equalled the average for the previous 26 years, the total for the year being 1,103·1 hours. The sun shone on 262 days of the year as compared with an average of 273 days for the previous 26 years. July was the sunniest month with 216 hours of bright sunshine, equivalent to a daily mean of 6·97 hours. The warmest day of the year was 11th July, when the highest temperature in the shade, namely 86 degrees, was recorded. The mean temperature in the shade averaged 48·7 degrees throughout the whole year. This was nearly two degrees higher than the average for the previous 26 years.

The relative humidity of the atmosphere averaged 81.5% throughout 1934, as compared with an average of 81.9% for the previous 26 years.

VITAL STATISTICS.

Live Births.

There have been 1,137 live births (601 males, 536 females) registered in Burnley during 1934. After correction of this total for inward and outward transferable births (supplied by the Registrar General) a net total of 1,110 births, or a decrease of 55 over the total for 1933 is obtained.

The following table shows the net births by sex and legitimacy.

Live Births.

		•	1934	
1933		Legitimate	Illegitimate	Total
571 594	Males Females	559 504	19 28	578 5 3 2
1,165	Total	1,063	47	1,110
12.15	Rate per 1,000 of the estimated resident Population	11.27	0.50	11.77

The percentage of illegitimate births was $4\cdot 2$, as compared with $5\cdot 2$ in the previous year.

The birth rate per 1,000 of population for the year was 11.77 as compared with 12.15 in 1933, and 14.3 the average for the 10 years 1924-1933. The rate is highest in St. Peter's, and lowest in St. Andrew's.

Throughout England and Wales the live birth rate in 1934 was 14·8, and in the 121 great towns 14·7. The Burnley birth rate, therefore, in addition to being the lowest recorded in the borough, is considerably lower than that of the whole country and of the large towns.

Stillbirths.

During the year 57 stillbirths were registered, giving a rate of 48·1 per 1,000 total live and still births and 0·64 per 1,000 of population as compared with 48·2 and 0·62 respectively in 1933. The sex and legitimacy of the still-births for 1934 are shown in the following table.

Stillbirths.

		1934						
1933		Legitimate	Illegitimate	Total				
30 29	Males Females	26 30	_ 1	26 31				
59	Total	56	1	57				

Deaths.

There were 1,507 deaths registered in Burnley during the year. Of this number 280 deaths of non-residents, chiefly occurring in public institutions, have been excluded, leaving 1,227 deaths of residents. To this number has been added 47 deaths of Burnley people who died in other districts.

After these corrections a net total of 1,274 deaths is obtained (males, 634; females, 640) giving a crude death rate of 13.51 per 1,000 of population, as compared with 14.86 for 1933, and 14.1, the average for the previous 10 years. Application of the adjusting factor for Burnley, viz. 1.08, gives an adjusted death rate of 14.58 for the borough. The death rate for England and Wales in 1934 was 11.8, and in the 121 great towns 11.8.

Age Distribution.

There were 110 deaths of children under 5 years of age, representing 8.7% of the total deaths. Of these 78 were children under 1 year of age. 33 deaths were of children between 5 and 15 years of age. 44 deaths were of persons aged 15 to 25 years. 127 persons died between the ages of 25 and 45 years; 388 between 45 and 65 years, and 572 or 44.9% of the total deaths, were aged 65 years and upwards.

Institutions.

There were 740 deaths in the Public Institutions of Burnley during the vear as follows:—

	Deaths of Burnley Residents.		Deaths of Non- Residents.		Total
Municipal General Hospital .	251		141		392
Victoria Hospital	103	• • •	78		181
Sanatorium for Infectious Diseases	26		6		32
Bank Hall Maternity and Children	's				
Hospital	35		1	•••	36
Primrose Bank Public Assistance	ce				
Institution	56		43		99
Totals	471	•••	269	•••	740

The deaths of Burnley people occurring in Public Institutions in the borough represent 37.0% of the total deaths, and are 5% higher than in 1933.

The following table gives comparative provisional figures respecting birth rate, death rate and analysis of Mortality during the year 1934.

The Mortality Rates refer to the whole population as regards England and Wales, but only to civilians as regards London and the towns).

Table shewing Birth Rate, Death Rate, and Analysis of Mortality during the year 1934.

(Provisional Figures)

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England and Wales	14.8	0.62	11.8	0.00	0.00	0.00	0.05	0.05	0.10	0.14	0.54	٠ ت ت	29	
121 County Boroughs and Great Towns, including London	14.7	99-0	11.8	0.00	0.00	0.12	0.03	90.0	0.11	0.12	0.47	7:4	63	
126 Smaller Towns (estimated populations 25,000–50,000)	15.0	19.0	11.3	00.0	0.00	0.07	0.03	0.04	0.00	0.14	0.42	3.6	53	
London	13.2	0.50	11.9	0.00	0.00	0.20	0.05	0.07	0.11	0.12	0.56	12.6	67	
BURNLEY Population (94,300)	11.77 0.64	0.64	13.5	0.01	0.00	0.00	0.04	0.05	0.19	0.10	0.57	3.60	70.3	
Maternal Mortality Rate per 1,000 total Births.	Rate per	r 1,00	0 tota	Birtl	hs:									1

Total. 4.41 14.57

Puerperal Sepsis.

1.95

England and Wales ... Burnley ...

2.46

Causes of Death.

In the table below the chief causes of death are shown. Details of the causes and ages at death with Ward distribution are given in Table 2 of the Appendix.

					Pe	rcentage of
				No.	To	tal Deaths.
Heart Disease, etc.			•••	366		28.1
Cancer			•••	171		13.4
Respiratory Diseases				100		7.9
All Forms of Tuberculo	sis			72		5.7
Disease of Arteries				64		5.0
Cerebral Hæmorrhage;	Apop	lexy		58		4.6
Violence				54		4.2
Disease of Early Infanc	y			41		3.2
Disease of Genito-Urina	ry Sy	stem		55		4.3

Heart Disease.

Heart Disease, with $28\cdot1\%$ of all deaths to its credit, again heads the list of specified diseases as the most frequent cause of death. There were 366 deaths, giving a rate per 1,000 of population of $3\cdot88$.

Cancer.

The deaths from Cancer—one hundred and seventy-one—are an increase of 9 compared with the figures for 1933. The death rate is 1·81 per 1,000. Malignant disease is now the second most frequent cause of death. The number of deaths and the death rate are the highest recorded in the borough.

	1925	1926	1927	1928	1929	1930	1931	1932	1933	1934
No. of Deaths Death Rate per 1,000	126	131	154	160	156	148	155	130	162	171
of Population	1.23	1.32	1.55	1.59	1.55	1.48	1.56	1.34	1.69	1.81

The following table shows the sex and age distribution of Cancer deaths in 1934.

1934	0-	5-	15	25	45—	65	75	Total
Male	_		_	2	35	26	12	75
Female	_		_	7	44	30	15	96

The sites affected with Cancer are given below:—

Site.				Males.]	Females	i.	Total
Buccal Cavity and Phar	ynx	•••		9		3		12
Digestive Organs and Po	eritoneur	n		43		52		95
Respiratory Organs				12		6		18
Uterus		•••		_		16		16
Female Genital Organs				_		1		1
Breast				_		14		14
Male Genito-Urinary Or	gans			9				9
Skin				1		_		1
Other or Unspecified	•••	•••	•••	1	•••	4	•••	5
				_				
	Totals		•••	75		96		171

Other Diseases.

The deaths from tuberculosis continue to show a gradual decline. The 76 deaths were 12 fewer than in the previous year and only 5.6% of the total deaths. The death rate attributable to pulmonary tuberculosis was 0.57, which is only half what it was 26 years ago and a quarter of that of half a century ago.

In contrast with the previous year, influenza was not unduly prevalent; it was mild in nature and consequently caused only 10 deaths.

Respiratory diseases, other than tuberculosis, e.g., bronchitis, pneumonia, etc., caused 100 deaths, or 1.06 per 1,000 of the population. The figure for 1933 was slightly higher and that for 1932 was the same as that for 1934. The present death rate from respiratory diseases is less than half that prevailing 10 years ago and but a fifth of that experienced at the end of last century. Fourteen of the 100 respiratory deaths occurred in children under 5 years of age and 66 in persons aged 45 years and over.

Accidents as a Cause of Mortality.

There were 33 accidental deaths, 9 of which were due to vehicular traffic.

The particulars and age groups are:--

Cause.	Under 1	1–5	5–15	15-25	25-45	45-65	65-75	Over 75	Total
Burns		3	l	1	1	1			7
Accidental Drowning		- 1	3					_	3
Injury by Fall		- 1	_		2	3	3	2	10
Injury in Mine	_	- 8	_	1	1	. 1	_	_ 1	3
Injury by Vehicular Traffic		1	_	1	2	2	2	1	9
Accidental Suffocation	1	_	_		_	1	_	_	2
Total	1	4	4	3	6	8	5	3	34

Infant Mortality.

There were 89 deaths under one year registered in Burnley during the year 1934. After correction for inward and outward transferable deaths, a net total of 78 deaths is obtained, or 9 less than the net deaths registered in 1933.

The infant mortality rate for 1934 is 70·3 per 1,000 births, as compared with 74·7 in 1933, a decrease of 4·4 and the lowest recorded in the borough.

The average infant mortality for the 10 years 1924-1933 is 93.6 per 1,000 births.

The death rate amongst legitimate infants per 1,000 legitimate livebirths was 69.6, as compared with 72.5 in 1933.

Of the 78 infant deaths, 4 were those of illegitimate children. The death rate of illegitimate infants per 1,000 illegitimate births was $85\cdot 1$, as against $114\cdot 7$ in the previous year.

The following table shows the Infantile Death Rate per 1,000 births for both sexes during the year under review, and the previous 10 years:—

Births.		ths.	Infantil	e Deaths.		tile Death 1,000 Birt	
Year.	Males	Females	Males	Females	Males	Females	Both Sexes
1924	867	834	132	83	152.2	99.5	126
1925	818	821	100	78	122.2	95.0	109
1926	845	755	81	57	95.8	75.5	86
1927	792	715	98	68	123.7	95.1	110
1928	757	744	63	56	83.2	75.3	79.3
1929	722	681	85	62	117.7	91.0	104.8
1930	687	651	59	42	85.9	64.5	75.5
1931	650	642	69	42	106.2	65.4	85.9
1932	589	580	57	44	96.8	75.9	86.4
1933	571	594	53	34	92.8	57.2	74.7
1934	578	532	49	29	84.8	54.5	70.3

The mortality amongst infants during 1934 in England and Wales and in the 121 great towns was 59 and 63 per 1,000 births respectively.

A chart showing the decrease in the birth rate and the reduction in the infant mortality during the last fifty-two years follows.

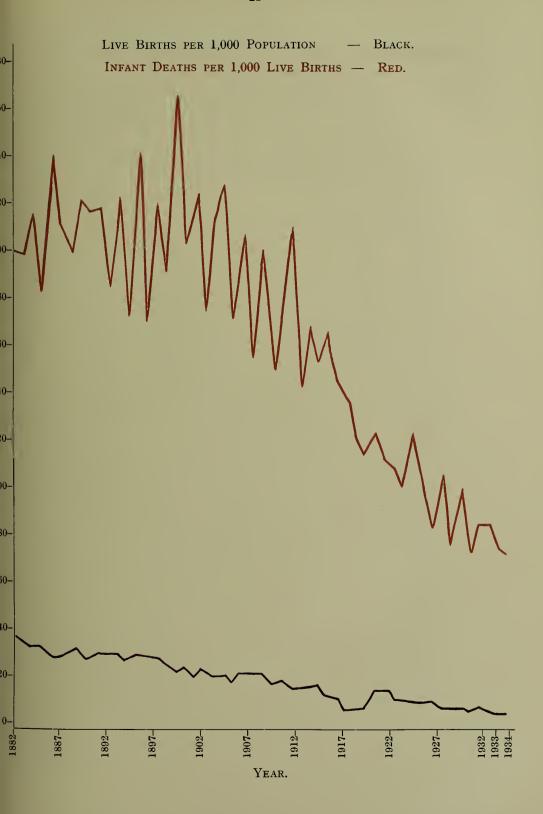


Table showing Infantile Mortality in the Lancashire Towns during 1934 as shown by the Returns of the Registrar-General.

							ths of under 1	Infants
Name of T	`own.							Births.
Barrow-in-Furn	ness						98	
Salford							92	
Bury							84	
Liverpool							80	
Rawtenstall							78	
Rochdale							78	
Colne							76	
Bootle		•••	• • •				75	
Warrington		•••					74	
Farnworth							72	
Oldham				•••	•••		72	
Swinton and Po	endlebi	ury	•••		•••		72	
Waterloo-with-	Seafort	th					72	
Ashton-under-I	yne						71	
BURNLEY							70	
Heywood							70	
Manchester							69	
Preston							69	
Wigan							67	
St. Helens							65	
Chadderton							62	
Leigh							60	
Widnes							60	
Blackpool							59	
Nelson							58	
Blackburn							57	
Chorley					•••		55	
Eccles							54	
Middleton							53	
Bolton			•••				53	
Southport							47	
Lancaster			•••	•••			46	
Accrington						•••	45	
Darwen	•••			•••		•••	45	
Stretford	•••			•••		•••	42	
Padiham			•••				40	

Causes of Death of Infants.

The table on the following page gives stated causes of death of children at various ages under one year. Of the 78 deaths, 47 occurred in infants under 4 weeks old, equivalent to a neo-natal mortality of $42\cdot3$ per 1,000 births. Congenital conditions, prematurity and conditions arising at birth, e.g., injury and atelectasis, were responsible for $61\cdot7\%$ of the neo-natal deaths.

The following table of neo-natal mortality shows that, for the last 10 years, there has been no improvement in the death rate of infants under 4 weeks old.

Year.				Neo-Natal Mortality per 1,000 Births.
1925		•••	•••	37.2
1926				36.9
1927			•••	48.9
1928				$42 \cdot 6$
1929			•••	43.5
1930				35.1
1931	•••			39.4
1932			•••	60.4
1933	•••			41.2
1934			•••	$42 \cdot 3$

INFANT MORTALITY DURING THE YEAR 1934.

NETT DEATHS FROM STATED CAUSES AT VARIOUS AGES UNDER ONE YEAR OF AGE.

1				,
	*Sanatorium	::		:
	*Victoria IstiqsoH	m :		3
	*Bank Hall Hospital	30		30
	*Municipal Hospital	∞ :		200
	Гомецропзе	9 :		9
	Cannow	# :		14
	Whittlefield	₩ :		4
	Trinity	.c :		ī0
	Healey Wood	# :	111111111111111	4
	Mood Wood	ie : ا	[] [] [] [] [] [] [] [] [] []	120
	F _n lledge	∞ :	::::::::::::::::::::::::::::::::::::::	oo
	St. Paul's	= :		=
	St. Peter's	10		101
	Stoneyholme	?ì :	:::::::::::::::::::::::::::::::::::::::	िश
	Daneshouse	m :	111111111111111111111111111111111111111	m
	St. Andrew's	9:	[] [] [] [] [] [] [] [] [] []	9
	Total under l Year	78		78
	9-12 Months	7		7
	sdrnoM e-8	7 ::		7
	3-6 Months	∞ :	[[[[[[[[[[[[[[[[[[[[000
	1-3 Months	6 :	[] [] [] [] [] [] [] [] [] []	6
	Total under	47		47
	3-4 Меекs	- :		1
	2–3 Меекѕ	<u>.</u> ن :	111111111111111111111111111111111111111	, c
	1-2 Wеекs	9 :		9
17.1	Under 1 Week	35		35
`			::::::::::::::::::::::::::::::::::::::	
	i	: _	ssis sis sis sis sis sis sis sis sis si	:
)eat	ed tiffec		:
	Causes of Death.	Certified Uncertified	npox	.ls
	uses	రిస్	x oox oox oox oox oox oox oox oox oox o	Totals
19	Can	s	ppox enpox est set set set set set set set set set	
		All	Smallpox Chickenpox Measles Scarlet Fever Whooping Cough Diphtheria and Croup Mumps Tuberculous Meningitis Abdominal Tuberculous Convulsions Laryngitis Bronchitis Preumonia (all forms) Diarrhœa and Enteritis Gastritis Syphilis Syphilis Suffocation Other Diseases of Infancy Congenital Malformations Premature Birth and Congenital Debility, etc. Other Causes Character Congenital Debility, etc.	
	1	ان	OO HOOWAMAHAMAHAWAAAA	

* Denotes that the figures shown in these columns are also included in the wards in which the parents of the children usually resided. Nett Deaths Registered during the year—Legitimate Infants, 74; Illegitimate Infants, 4; Total, 78. Nett Live Births Registered during the year-Legitimate, 1063; Illegitimate, 47; Total, 1110.

Section 2.

General Provision of Health Services in the Area.

HOSPITALS PROVIDED BY THE LOCAL AUTHORITY.

COUNTY BOROUGH OF BURNLEY.

Bank Hall Maternity and Children's Hospital.

No new developments or changes in the services provided in this hospital have occurred during 1934. 364 maternity and ante-natal cases and 136 children under five years of age were received into the hospital.

The Municipal General Hospital.

This hospital, which was appropriated as from 1st April, 1933, is being used to a much greater extent for the treatment of acute medical and surgical conditions.

The accommodation, methods of administration and staffing of the hospital, including the consulting staff appointed when it was appropriated, were given in previous reports. During 1934, an ophthalmic surgeon and laryngologist was appointed to the consulting staff.

The services available in the Municipal General Hospital are being coordinated with the other Health Services of the Local Authority. Tonsil and adenoid operations on pre-school and school children, previously performed in the local Voluntary Hospital, are now carried out in the Municipal Hospital. Children requiring X-Ray examinations are referred from the School Clinic, Infant Welfare Centres and Children's Ward of Bank Hall Hospital to the X-Ray Department of the Municipal Hospital.

The X-Ray plant previously in use in the Tuberculosis Dispensary was transferred to the X-Ray Department of the Municipal General Hospital, to replace the apparatus therein, which was out-of-date. All the X-Ray diagnostic work in connection with the Tuberculosis Dispensary Scheme is now carried out at the Municipal Hospital.

Tuberculous persons, on the register of the Tuberculosis Dispensary, who require "light" treatment for tuberculous gland or skin disease, are treated in the Electro-therapeutic Department of the Municipal Hospital.

The Scheme of Co-operation with the Victoria (voluntary) Hospital, which came into operation in May, 1932, has continued. During 1934, however, the Victoria Hospital Board of Management had to curtail, for financial reasons, the number of patients on the Victoria Hospital waiting list referred to the Municipal Hospital for treatment. Instead of the thirty beds originally agreed upon, not more than fifteen are now being utilised. The cases sent by Victoria Hospital to the Municipal Hospital for in-patient treatment during 1934 numbered 270.

The Operating Theatre of the Municipal Hospital is inadequate in size and out-of-date; there is no anæsthetising room, recovery room, plaster room, etc. The accommodation in the X-Ray and Electro-therapeutic Department is insufficient. The Children's Ward is only a semi-permanent building, with many defects in construction and not suitable for the nursing of acutely-ill children. Consideration is being given at present to the replacement of these departments of the hospital by new buildings.

Statistics of the work performed in the hospital are given on pages 168 to 171.

Primrose Bank Institution.

No new developments or changes in the areas served by this Institution, or in the accommodation or staffing, have occurred during 1934.

Venereal Diseases.

No change has occurred in the arrangements for in-patient treatment of venereal diseases.

Tuberculosis.

No change has occurred in the arrangements for the provision of sanatorium and hospital beds for the treatment of tuberculosis. Owing to the excessive prevalence of infectious diseases, it was not possible to utilise one of the wards in the Infectious Diseases Hospital for adult female cases of pulmonary tuberculosis for more than five months during 1934.

Delicate Children.

As no Smallpox occurred in the area of the Burnley Joint Hospital Board during 1934, it was again possible to utilise the Smallpox Hospital at Crown Point throughout the year for the open-air treatment of delicate children from Burnley, on the same conditions as in previous years.

The following are particulars of the cases under treatment during 1934:—

Number under treatment on 1st January, 1934	 28
Number of children admitted during 1934	 42
Number of children discharged during 1934	 70
Number under treatment on 31st December, 1934	 _

The hospital was evacuated on 14th December, 1934, on account of an outbreak of diphtheria, and was re-opened on 7th January, 1935.

The following are the conditions from which the 70 children were suffering:—

Non-Tuberculo	ous Respir	atory D	isease				26
Non-Infectious	Tubercul	ous Dis	ease			•••	7
Debility, Anær	nia, etc.						31
Convalescent a	fter acute.	illness	and op	eratio	ıs		3
Malnutrition .				•••	•••		1
Cardiac Diseas	e			•••			1
Adenitis .		•••		•••			1
							_
				Total			70

Orthopædics.

No change has been made in the arrangements for hospital treatment of crippled children.

Ear, Nose and Throat.

Prior to September, 1934, pre-school and school children requiring operative treatment for enlarged tonsils and adenoids, were referred from the Child Welfare and School Medical Departments to Victoria (voluntary) Hospital. Difficulty was experienced in providing beds for the retention of the children over-night after operation. The arrangement with Victoria Hospital was therefore terminated, and children are now referred to the Municipal General Hospital. They enter the hospital on the afternoon prior the operation, to enable them to be properly prepared, and are retained for at least one night after operation. The Ear, Nose and Throat Surgeon, who previously performed the operations in Victoria Hospital, has been appointed a Consulting Surgeon to the Municipal Hospital and continues to perform these operations.

Ophthalmia Neonatorum, Puerperal Fever and Puerperal Pyrexia.

No beds are specifically set apart for the treatment of children suffering from ophthalmia neonatorum and women suffering from puerperal fever or puerperal pyrexia. Cases are admitted for in-patient treatment to the Burnley Joint Hospital Board's "Sanatorium," (Infectious Diseases Hospital), Marsden Road.

Mental Hospitals.

The Lancashire Mental Hospitals Board is the Authority responsible for the provision of institutional accommodation for patients suffering from mental diseases. Burnley is one of the constituent authorities of the Board and has two representatives.

The Mental Hospitals of the Board are five in number.

The persons chargeable to the County Borough of Burnley, who were in Mental Hospitals on the 31st December, 1934, are as follows:—

Mental Hospitals.				Men.	7	Women	. C	hildrei	1.	Total.	
Whittinghan	n (Incl	uding	volunt	ary							
patients	s)				61		93		-		154
Lancaster					34		57				91
Winwick					9		1		-		10
Prestwich	•••				2		5		_		7
Rainhill					_		1				1
Wakefield					1						1
				-							
	Total		•••		107		157	• • •			264
Prestwich Rainhill				 	2 - 1		5 1 —		_ 		7

There are two mental blocks, one for men and one for women, with accommodation for 74 of each sex, in the Primrose Bank (Public Assistance) Institution, Burnley. On the 31st December, 1934, there were in these mental blocks, 30 men and 29 women chargeable to the County Borough of Burnley.

Mental Deficiency.

The Mental Deficiency Acts are administered by the Lancashire Mental Hospitals Board. Mental Defectives from Burnley are sent to the Board's Institutions at Calderstones and Brockhall. The Central Lancashire Association for Mental Welfare is the voluntary committee for the care of Mental Defectives, and their activities include the general supervision of mental defectives of all grades in the Borough. An occupation centre is also held in Salem School.

On the 31st December, 1934, the following persons, chargeable to the County Borough of Burnley, were in Certified Schools and other Institutions:—

Men.	Women.	Children under 16	Total.
5	10	18	33

BURNLEY JOINT HOSPITAL BOARD.

Marsden Road Sanatorium (Infectious Diseases Hospital) and Crown Point Smallpox Hospital.

No changes in the accommodation, administration or staffing of these hospitals were made during 1934. 768 cases were admitted to the Infectious Diseases Hospital, further particulars of which are given on pages 86 and 87. No cases of smallpox were admitted to Crown Point Hospital, which was used throughout the year as a Convalescent Hospital for delicate Children. (vide supra).

VOLUNTARY HOSPITALS.

Victoria Hospital, Burnley.

12 beds, for the treatment by radium of cancer patients, were added to this hospital and put into use in December, 1934.

The numbers of patients dealt with during the year ended 30th November, 1934, were:—

	In-Pa	tients.	Out-Pa	atients.	Sent to Municipal Hospital (In-Patients).		
	Contributors to Local Scheme.	Non- Contributors	Contributors	Non- Contributors	Contributors	Non- Contributors	
Burnley Cases	871	614	4088	4467	265	61	
Cases from Adjoining Areas	353	265	1422	715	49	_	
Total	1224	879	5510	5182	314	61	

In-Pa	TIENTS:	1934.		- 1933.	
1.	Number of beds available for use	130		125	
2.	Daily average number of in-patients	118		116	
3.	Number of patients in hospital at beginning				
	of year	125		127	
4.	Number of patients admitted during year	2103		2209	
5.	Number of patients remaining at end of year	130		125	
6.	Average duration of stay per patient (days)	20.5	•••	19.1	

					New	v Patie	nts.
Out-l	PATIENTS:				1934.		1933.
1.	Medical and Dermatolog	gical			883		508
2.	General Surgical				3798	•••	3699
3.	Ophthalmic and Aural				2104		1480
4.	X-Ray Department (Tre	eatment	ts)		797		633
5.	Ultra-Violet Light	•••	•••	•••	82	•••	49
6.	Massage and Electrical	•••	•••	•••	969		924
7.	Radium Department	•••	•••	•••	148	•••	154
		ens					
		Total	•••	•••	8781	•••	7447
Casua	ALTY DEPARTMENT:						
1.	Number of Casualties				989		944
2.	Number of Casualties at	ttendan	ices		2786		2419
3.	Number of Motor Accid	dents (:	include	d in			
	above)		•••		134		141
4.	Number of Motor Accid	dents a	dmitte	d to			
	Wards			•••	62	•••	51
5.	Number of days such Cas	es were	in Hos	pital	1620	•••	1499
Тоты	L OUT-PATIENTS AND CAS	TTAL TELE					
			,5,		10000		
1.	Number of Out-Patients		•••	•••	10692		
2.	Number of attendances	•••	•••	•••	56773		
OPER	ATIONS PERFORMED:						
1.	In-Patients	•••		•••	1519		
2.	Out-Patients	•••	•••		1262		
3.	Casualties	•••		•••	518		
					3299		

Subsidies to Medical Institutions.

Contributions are made by the Local Authority to the following:—Victoria Hospital, Burnley; Burnley District Nursing Association, and the Manchester and Salford Medical Charities.

Convalescent Home.

The Convalescent Home for Children at Lytham-St. Annes, was built by the late Sir John Thursby for the children of Burnley and district. There

is accommodation for twelve boys and twelve girls, and during the year 291 Burnley children were admitted on the recommendation of the School Medical Officers.

Professional Nursing in the Home.

A voluntary body, the Burnley District Nursing Association, undertakes the professional nursing of cases of general sickness in the home.

The Local Authority has an arrangement for payment per visit in connection with their Maternity and Child Welfare Scheme whereby the above Association sends a nurse when required to cases of whooping cough, measles, and diarrh α a in young children, to cases of puerperal fever, pyrexia, ophthalmia neonatorum and for maternity nursing.

Midwives.

Apart from those in institutions, 19 midwives notified their intention to practise in the borough during 1934.

No midwives are employed directly by the Local Authority in district midwifery and no midwives were subsidised during 1934. From March, 1935, the midwife's fee is paid by the Local Authority in necessitous cases, where the patient has engaged a doctor only and when the doctor certifies that a midwife is necessary also (vide page 123). Compensation at the rate of 7/6 per week is paid to midwives who have been engaged for confinements and have carried out ante-natal examinations, where it is necessary subsequently to remove the patient to hospital for the confinement.

Maternity and Nursing Homes.

There are two small private nursing homes in the borough; one for general and maternity cases and the other for eye, ear, nose and throat cases. They have been well conducted and adequately staffed and maintained during the year. Two nursing homes for general and maternity cases, in areas adjoining Burnley, are used to a considerable extent by Burnley residents. No applications for registration or exemption from registration were received during 1934.

Institutional Treatment for Unmarried Mothers, Illegitimate Infants and Homeless Children.

There are no institutions specifically set apart for dealing with these cases. Such cases are usually dealt with at the Primrose Bank Public Assistance Institution.

The Burnley and District "Bankfield" House of Help for women and girls has accommodation for 10 cases. Unmarried mothers are received and transferred to other suitable homes.

Ambulance Facilities.

The Joint Hospital Board possess a motor ambulance for the removal of infectious cases. The Police Department has two ambulances for non-infectious and accident cases. The Health Department ambulance is used for the conveyance of cases of smallpox and tuberculosis.

Public Health Laboratory and Venereal Diseases Clinic.

These are housed in an annexe of Victoria Hospital, which is rented by the Corporation. An assistant medical officer is employed as bacteriologist and venereal diseases officer. He also acts as honorary pathologist to the Victoria Hospital.

Chemical Work.

The Local Authority possesses a Chemical Laboratory, which is staffed by the Borough Analyst (Mr. F. Maudsley, B.Sc., F.I.C.) and a qualified assistant, who are in the whole-time employment of the Corporation. Biochemical work for the municipal hospitals and clinics and for the voluntary hospital is carried out by a local biochemist, Mr. H. Lawrie, B.Sc.

CLINICS AND TREATMENT CENTRES.

The Local Authority provide the following clinics at the places and times stated:—

INFANT WEIFARE CENTRES:

Bank Hall Maternity Hospital (Annexe) Monday 2-	<i>)</i> p.m.
,, ,, ,, ,, Friday 2-) p.m.
Mount Olivet School, Plover Street Monday 2-) p.m.
Ebenezer School, Colne Road Tuesday 2-) p.m.
Rosegrove Wesleyan School, Gannow Lane Tuesday 2-) p.m.
Lanebridge School, Parker Lane Wednesday 2-) p.m.
17, Parker Street Thursday 2-) p.m.

ANTE NATAL CLINICS:

17. Parker Street

Bank Hall	Maternity	Hospita	al (Anne	xe)	Monday	 9-30 a.m.
,,	,,	,,	,,		Wednesday	 5-0 p.m.
,,	,,	,,	,,		Thursday	 10-0 a.m.
Rosegrove	Wesleyan	School,			(By appoint Tuesday (Alternate w	 2-0 p.m.

Friday

2-30 p.m.

CLINICS FOR	Schoo	L CHILDRE	N:						
Elizabeth	Street	•••				Monday		2-0 p.	
,,	,,		•••		• • •	Tuesday		9-30 a.	
,,	,,	•••	•••	•••	• • •	Wednesday	• • •	2-0 p.	
,,	,,	•••	•••	•••	• • •	Thursday		9-30 a.:	m.
DENTAL CLI	NIC (By appoint	ment (nlv)					
Elizabeth						Daily		9-0 a.:	m
Biizasetii	Otrect	•••	•••	•••	•••	Burry	•••	and	
								1-45 p.	m.
Орнтнациіс	CLINIC	AND Nosi	E AND	THROA	т Сі	LINIC.		1	
Elizabeth	Street					By appointn	ent	only.	
ORTHOPÆDIC	CLINIC	c. (By app	oointm	ent onl	ly).				
Elizabeth	Street				• • •	~			
						last Thursd			ch
						month			
,,	,,	•••	•••	•••	•••				ily
						by appointn	ient.		
Immunisatio						337 1 1.		9 . ()	
Elizabeth	Street	•••	•••	•••	•••	Wednesday	•••	3-0 p.:	m.
Ultra-Violi	ET LIGH	HT CLINIC.	(By a	ppoint	ment	t only).			
						Wednesday		9-30 a.:	m.
Municipal	Genera	,, al Hospital				By appointn	ent.		
Tuberculos			• \			36 1		0.0	
		(Children o	. ,	•••	•••	Monday	•••	9-0 a.:	
	,,	(Adults on		•••	•••	Tuesday	• • •	9-0 a.i	
,,		(Dressings,	,	•••	•••	Wednesday Wednesday	•••	9-0 a.i	
,,		(Adults) (Adults)		•••	•••	Thursday	•••	6-0 p.: 9-0 a.:	
		(Dressings)				Friday		9-0 a.i	
X-Ray Ex	,,			•••		1 Haay		9-0 a.	11.
•	caminat	ions Munic	rinal G	eneral	•••	<i>3</i>			
Hospi		ions, Munic	_			J			
Hospi		ions, Munic	_	eneral		By appointm			
VENEREAL I	tal Disease	s Clinic.				J			
Ť	tal Disease	s Clinic.	 (Men)			By appointment		10-0 a.ı	
VENEREAL I	tal Disease	s Clinic.	(Men) (Men)			By appointment Monday Monday	ent.	5-30 p.s	m.
VENEREAL I Victoria H	tal Disease Hospital	s CLINIC. (Annexe)	(Men) (Men) (Men)			By appointm Monday Monday Thursday	ent.	5-30 p.i 5-30 p.i	m. m.
VENEREAL I Victoria F	tal Disease Hospital ,,	s Clinic. (Annexe)	(Men) (Men) (Men) (Wom	 en and		By appointment Monday Monday	ent. 	5-30 p.s	m. m.
VENEREAL I Victoria F	tal Disease Iospital ,,	s Clinic. (Annexe)	(Men) (Men) (Men) (Wom Chil	 en and dren)		By appointment of the Monday Monday Thursday Friday	 	5-30 p.: 5-30 p.: 11-0 a.:	m. m. n.
VENEREAL I Victoria F	tal Disease Iospital ,,	s Clinic. (Annexe)	(Men) (Men) (Men) (Wom Chil	 en and		By appointm Monday Monday Thursday	 	5-30 p.i 5-30 p.i	m. m. n.

Day Nurseries. None provided.

Maternity and Child Welfare Services.

The provision of services in connection with puerperal fever and pyrexia, Memo. 156 M.C.W., Health Visiting and Infant Life Protection, are described in the Maternity and Child Welfare Section of this report.

Public Assistance Medical Out-Relief.

No change has been made in this service during 1934. The work of the two part-time District Medical Officers is summarised as follows:—

	1	No. of Attendances at Surgeries.	No. of Domiciliary Attendances.	Total Attendances.
No. I District		1203	242	1445
No. II District		1181	1145	2326
Total		2384	1387	3771

Public Vaccination.

No change has been made in this service during 1934. Statistics of vaccinations performed by the Public Vaccinators are given on page 197.

Legislation in Force.

A list of the General Adoptive Acts, Local Acts, Bye-laws and Local Regulations in force in the Borough, with the date they became operative, is given in my report for 1932. During 1934, new Bye-laws in respect of Houses let in Lodgings were substituted for the existing ones, and Bye-laws were made relating to Smoke Abatement and Offensive Trades.

Health Propaganda.

No Health Week or Health Exhibition was held during 1934. Five poster-frames in different parts of the town are used for health propaganda purposes. A series of talks on dental hygiene was given to children in the schools by a lecturer from the Dental Board of the United Kingdom. Health lectures to various organisations such as women's guilds, girls' clubs, young men's classes, etc., were given as follows:—

					I	ectures.
Ву	Medical Officer of Health		 			12
,,	Chief Sanitary Inspector		 •••	•••		10
,,	Assistant Medical Officers		 			4
,,	Superintendent Health Visit	tor	 			2

A series of 16 short talks was given at each of the Infant Welfare Centres.

Section 3.

Sanitary Circumstances of the Area.

Water Supply.

No extensions of the gathering grounds, reservoirs or filtration plant have been made during 1934.

All the permanent dwellinghouses in the borough have water laid on from the town's main supply. The only dwelling places which have no direct water supply are eight vans used as temporary dwellings.

Houses with town's water supp	ply la	id on	•••		•••	•••	28,029
Vans obtaining town's water s	upply	from	adjoining	pren	nises		5
Vans using spring water			•••		•••		3
							28,037

The system of water supply of the borough may be summarised briefly as follows. The supplies from Cant Clough and Hurstwood Reservoirs are each filtered through Bell's mechanical filters, and both join with unfiltered water from Worsthorne Bore Hole to enter Heckenhurst Storage Reservoir. Water from Swinden No. 1 Reservoir is not filtered and joins with unfiltered water from Clough Croft, Snail's Wells and Thurstwell Springs to enter Heckenhurst Storage Reservoir. Two low pressure mains go to the town from Heckenhurst Reservoir. A small unfiltered supply from Calf Hey Spring joins one of these low pressure mains in the northern part of the town. A high level filtered supply goes direct from Cant Clough Reservoir to the southern part of the town and there are two direct supplies from Swinden No. 1 Reservoir. In addition there is a reservoir for compensation purposes.

All the reservoirs are within a distance of 4 miles from the town. The drainage areas cover 3,225 acres and are exclusively owned by the Corporation and are free from human habitations or cultivated land.

The Cant Clough supply is analysed periodically for plumbo-solvency by the Borough Analyst.

On the 20th December, 1934, the supply in store was 702 million gallons compared with 453 million gallons in December, 1933. The consumption of water during the year was 814,002,024 gallons—approximately 67,887,496 gallons less than in the previous year.

The supply of water is ample for the needs of the town. The rainfall, as measured at seven different points on the gathering grounds, shows an average of 42.58 inches in the year. The lowest amount measured was 40.42 inches and the highest 45.35 inches.

The reports on the chemical and bacteriological analyses of the water made during 1934 are as follows:—

BACTERIOLOGICAL ANALYSES OF WATER.

			-		
Shedding Bore Hole.	12th Dec.	38			100
Twist Springs.		-	29	1	35
Briercliffe Overflow.		žΦ	17	1	13
Thurstwell.	vember	4	16	1	35
Clough Croft Spring.	4th November.	None	10	1	ıφ
Snail's Wells.		£Φ	ō.	I	25
Worsthorne Bore Hole.		का	_		Nil.
	4th Dec.	9		1	Nil.
st. ly).	ovo dta	15	64	I	25
Heckenhurst. (Mixed Supply)	4th Oct.	23	32	ı	180+
Hec (Mixe	4th Sept.	1.5	-	10c.c.	25
	31st July	က	12	10c.c.	70
	4th Dec.	ಣ	1	1	∞
	ovo dta	-	7	1	25
Swinden.	4th Oct	13	27	1	180+
	4th Sept.	64	132	1	06
	3 lst July	20	20	1c.c.	180+
	4th Dec.	None	1	I	Nil.
lgh.	oth Nov.	ಣ	્ર	ı	89
Cant Clough.	4th Oct.	-	4	1	Nil
Cant	4th Sept.	7	46	1	Nil.
	glul tels	6	10	10c.c.	50
Supply.	Date.	Colonies per c.c. on Agar at 37°c in 48 hours	Colonies per c.c. on Agar at Room Temp. in 72 hcurs	B. Coli present in	Probable No. of B. Coli per 100 c.c

Chemical Analyses of Water.

		25 Samples taker	25th April, 1934. Samples taken from Domestic Supplies.	tic Supplies.	29th Samples take	29th October, 1934. Samples taken Direct from Springs.	Springs.
		Heckenhurst Reservoir.	Swinden Reservoir.	Cant Clough Reservoir.	Worsthorne Bore Hole	Clough Croft Spring.	Thurstwell Spring.
Free Ammonia	:	0.0058	0.0062	0.0058	0.0156	0.0017	0.0016
Albuminoid Ammonia	:	0.0062	0.0064	0.0064	0.0024	0.0040	0.0058
Oxygen Absorption (4 hours)	:	0.072	0.077	0.077	0.025	0.030	0.030
Oxygen Absorption (3 Minutes)	:	0.010	0.015	0.010	0.020	0.015	0.010
Chlorides (as Chlorine)	:	1.3	1.2	1:3	1.2	1.4	1.3
Nitric Nitrogen	÷	Trace	Trace	Trace	Nii.	60-0	0.104
Total Solids	÷	10.8	11.2	11.2	20.0	16.0	16.4
Total Mineral Matter	:	7.2	7-2	8.0	1	1	1
Total Organic Matter	:	3.6	0.7	3.2	1		-
Reaction	:	Slightly Alk.	Slightly Alk.	Slightly Alk.	Slightly Alk.	Slightly Alk.	Slightly Alk.
Hydrogen Ion. Concentration	:	0.8	0.8	8.0	1	1	·
Lead Present	- <u>:</u>	Nil.	Nil.	Nil.	Nil.	Nil.	Nil.
Lead Absorption (24 Hours Contact)	:	Nii.	.ii.	Nil.	Nil.	Nil.	Nil.
	J						

OBSERVATIONS.— All Suitable for drinking and domestic purposes.

The free ammonia figure for Worsthorne Bore Hole is rather high, but the other figures are so good that this water may be classed as a satisfactory supply.

Rivers and Streams.

The water from the rivers as they run through the town is not used for domestic purposes.

No legal action has been taken by the Local Authority (the Ribble Joint Committee) in connection with rivers in Burnley.

Drainage and Sewerage.

Sewage is conveyed to the Treatment Works entirely by gravitation. The town is sewered mainly on the partially separate system, the general practice wherever practicable being to provide a sewer at the rear of houses, which takes the domestic sewage together with rainwater from the back roofs and back streets, and a surface water drain in the front street which takes the rainwater from the street and from the front roofs of the houses. This system has also been adopted where practicable for modern development. The remainder of the town is sewered on the combined system and has no separate surface water drains. The area sewered on this system is relatively small and is confined to the older portions of the town or to portions where there are no reasonable outfalls for surface water drains.

The town, along with certain parts of the Rural District Council's area, is divided into two drainage areas. The eastern area drains to Duckpits and Wood End Treatment Works and the western area to Altham Treatment Works. The effluents from both works discharge into the River Calder.

Particulars of the reconstruction of the Treatment Works at Duckpits and Wood End and the main outfall sewer to Duckpits Works were given in my report for 1933. An extensive sewerage and flood prevention scheme is now in course of construction to provide for the northern and eastern districts of the borough and a portion of the Rural District Council's area. Smaller schemes are being carried out elsewhere.

The crude sewage at both works is on occasion difficult to purify owing to strong trade wastes, but despite this fact a satisfactory standard is obtained in the final effluent, the average purification being in the region of 80 to 85 per cent.

The following are the average figures for 1934 for the albuminoid ammonia and oxygen absorption for the final effluents from the Corporation Sewage Works at Wood End and Altham.

Wood Eve

			WOOD END.		
		D	ouble Conta	.ct.	ALTHAM.
		,	gle Contact and Filtration		Aeration and Single Contact.
Albuminoid Ammonia	 		0.220		0.175
Oxygen Absorption	 		1.797		1.756

The above results are expressed in parts per 100,000.

Public Cleansing.

Collection of Refuse.—The method of collecting dry house refuse was described in my report for 1932 (page 53). No alteration in the arrangements were made during 1934.

DISPOSAL OF REFUSE.—During the year $71\cdot3\%$ of the town's dry house refuse has been disposed of by separation and incineration, whilst the remaining $28\cdot7\%$ has been tipped in layers and covered with fine dust extracted by means of the refuse screening plant.

The Council have recently approved the provision of a new refuse handling and screening plant.

Approximately six loads of excreta are collected from tanks, etc., weekly and disposed of either by spreading on rough pasture land away from main roads and property, or by placing in holes dug in rough tips and lined with ashes.

The Cleansing Department, which is responsible for this work, supply the following figures relating to the amount of refuse dealt with during the year ended 31st March, 1935:—

	Tons.	Cwts.
Total amount of refuse destroyed	14,872	5
Total amount of refuse deposited at tips	6,008	10
Clinker removed from Destructor	2,613	2
Fine ash and dust separated and tipped	6,138	12
Total amount of refuse collected during the		
year	20,880	15

Ashpits.

Thirty-five years ago, the number of ashpits was almost double the number of ashbins. Under powers contained in the Burnley Corporation Acts, 1908 and 1925, ashpits have been gradually abolished and the more sanitary dustbin substituted, the Corporation contributing towards the cost of conversion in

certain circumstances. In 1933, the scheme of ashpit abolition was accelerated, and by the end of 1934 there remained only 71 ashpits in use in the borough. These are in areas scheduled for Slum Clearance and will be abolished when the houses to which they are attached are demolished.

Receptacles for Refuse, attached to Dwellinghouses at December 31st, 1934.

2
3
1
3
5
)
-
7
3

Numbers of Ashpits and Ashbins in use in the Borough during the last 14 years.

Year		No. of Ashpits	No. of Ashbins
(December 3	31st)	in use.	in use.
1920		15,352	 9,853
1930		9,265	 18,067
1931		8,555	 19,014
1932		7,787	 20,041
1933		6,788	 21,269
1934		71	 28,628

General Sanitary Inspection.

This work is carried out by seven Assistant Sanitary Inspectors under the direction and control of the Chief Inspector. Two Assistants are employed solely on housing, and one on the investigation of cases of Infectious Diseases and the supervision of disinfection, etc. There are four District Inspectors who are each responsible for one of the districts into which the town is divided.

During the year 3,767 complaints were received and investigated. The following summary gives a classified list of the visits paid by the Inspectors during the year, compared with the figures for the preceding year:—

	1934	1933
	No.	No.
Visits to Factories	164	147
,, Workshops and Workplaces	351	453
,, Bakeries	806	944
Visits to Chip, Fish and Tripe Shops	303	312
,, Ice-cream Shops	73	113
,, Milk and Grocers' Shops	181	203
" Fruiterers' and Fishmongers' Premises	117	113
" Butchers, Bloodboilers and Food Preparers …	124	209
,, Milliners and Dressmakers	17	26
" Other Dress Trades	3	12
" Hairdressers and Barbers	15	21
" Marine Stores and Offensive Trades	161	270
,, Stables and Manure Pits	2183	2967
,, Premises where Animals are kept	290	361
" Lodging Houses, Registered	123	126
,, Lodging Houses, Unregistered	14	15
,, Vans, Tents, etc	114	128
,, Canal Boats	20	24
,, Back-to-Back and Single Dwellings	2057	2576
,, Furnished Rooms	583	740
,, Other Dwellings	12924	13759
" Reported Overcrowded Dwellings	20	22
,, Reported Dirty Dwellings	165	171
,, New Property re Closets, etc.	458	275
,, Old Property re Alterations	206	412
,, Premises where Nuisances exist	10257	13891
Drains Tested	351	349
Legal Notices Served	1895	815
No. of Preliminary Notices sent out to abate Nuisance	2382	2898
No. of Defects reported to Borough Surveyor	118	203
No. of Defects reported to Cleansing Department	487	432
No. of Defects reported to Highways Department	1024	886
Smoke Observations taken	372	392
Visits to Boiler Houses	22	39
Interviews with Owners, Agents, etc., re Property	3471	2873
Visits to School Premises	365	448

There were 3,767 defects found and dealt with as compared with 5,120 in the previous year. In connection with these, 2,382 informal notices were sent to occupiers and owners, and in others verbal notices were given. In

most cases these were sufficient to secure the necessary work being carried out. It was found necessary to report to the Health Committee and secure authority to serve Statutory Notices with regard to 741 defects and 1,895 legal notices were served including 1,376 for the conversion of ashpits to bins. All defects brought forward from the previous year were followed up and remedied. At the close of the year there were 499 defects of various kinds on the books of the Department.

The following are the particulars of the Statutory Notices served:— Legal Notices served during the Year.

Public Health Act, 1875, Sections 91-94. There were 406 served relating to:—

Defective Water Closets, Tippers, etc	96
,, Drains, etc	25
,, Yard Flags	65
,, Troughs, Spouts, etc.	103
Damp House Walls, Defective Roofs, etc	112
Dust Bins	49
Refuse	11
Defective Sinks and Waste Pipes	4 9
Others	118

The number of defects for which notices have been served was 628, but in some cases more than one defect was put on one notice.

Burnley	Corporation	Act,	1908,	Section	n 85.	
,,	,,		1921,	,,	50.	
,,	,,		1925,	,,	67.	
Not	ices served re	lating	g to As	shbins		1376.

Towns Improvement Clauses Act, 1847, Section 74; Public Health Act, 1875, Section 160, relating to:—

Defective eaves troughs, rain pipes, etc.—Notices served, 74.

Public Health Act, 1875, Sections 91 to 94. Notices relating to Black Smoke	10
Burnley Borough Improvement Act, 1883, Section 42. Relating to Water Supply	2
Burnley Corporation Act, 1925, Section 53.	
Notices relating to blocked drains	27

In previous years considerable nuisance was caused by the emanation of fumes, containing sulphuretted hydrogen gas, from colliery tips, which were on fire from time to time. An ample water supply is available at the collieries within the Borough to quench the fires, and hence the occasional nuisances from tips within the Borough were not prolonged. During 1933 much nuisance was caused by the fumes from an extensive fire in a tip a short distance beyond the Borough Boundary. Many complaints were received of discomfort experienced by persons subject to respiratory affections and of tarnishing of household effects. This fire was difficult of control on account of a shortage of water. A pump was erected and permanent pipes laid from a nearby stream, giving a sufficient supply of water to quench the fire. Consequently during 1934 no nuisance from this source has been occasioned.

Many complaints were received during 1934 of nuisance caused by coal dust from two coal screening plants belonging to a colliery company. In each case, the coal dust permeated the adjoining houses and caused considerable inconvenience to the tenants. In one instance the nuisance was abated by repairs to the building containing the screening plant. In the other, alterations to the plant are at present being carried out, which it is hoped will diminish the nuisance.

SMOKE ABATEMENT.

During the year 372 observations of 30 minutes' duration were taken on 100 chimneys. No black smoke was emitted on 324 of these; of the remainder black smoke, in excess of the five minutes fixed by the Committee as the amount above which action should be taken, was emitted on 11 occasions. The other black smoke emissions were:—

Amount. Minutes.	Occasions	Amount. Minutes.	Occasions.
$\frac{1}{2}$	 13	 3	 6
1	 2	 $3\frac{1}{2}$	 4
$1\frac{1}{2}$	 9	 4	 2
2	 4	 _	
$2\frac{1}{2}$	 4	 5	 1

The result of each observation has been communicated to the firm concerned.

51 letters have been sent out. 6 legal notices have been served. 22 visits were paid to boiler houses.

SUMMARY OF OBSERVATIONS.

No. of	No. of	Average
Chimneys	Observations	per
Observed.	Taken.	Chimney.
100	372	3.72

RESULTS OF OBSERVATIONS.

			Light or
	Black.	Moderate.	None.
Total Smoke in minutes	209.5	 1135.5	 9815
Average Smoke in minutes	0.563	 3.052	 26.385

The following Bye-law, made in pursuance of Section 2 of the Public Health (Smoke Abatement) Act, 1926, came into operation on 1st February, 1935:—

"That the emission of black smoke for a period of two minutes in the aggregate within a continuous period of thirty minutes from any one chimney in a building other than a private dwellinghouse shall until the contrary is proved be presumed to be a nuisance."

PREMISES AND OCCUPATIONS CONTROLLED BY BYE-LAWS OR REGULATIONS.

Common Lodging Houses.

The registration and supervision of the Common Lodging Houses are under the direction of the Health Committee. Bye-laws affecting these places received the sanction of the Local Government Board in 1907.

These are:—

- (1) For fixing and from time to time varying the number of lodgers who may be received into a common lodging house, and for the separation of the sexes therein; and
- (2) For the giving of notices and the taking of precautions in case of any infectious disease; and
- (3) Generally for the well-ordering of such houses.

List of Common Lodging Houses at the end of the year.

	Accommodation. (All Males).
Kay Street	215
Barracks Road	120
Calder Street (S.A. Hostel)	76

The Lodging Houses have bee	n peri	iodically visited.	
Number of visits	123	Defects found	 4
These defects were:—			
Not Limewashed	3	W.C. Defects	 1

In addition to these Common Lodging Houses there are a number of others to which 14 visits have been paid. Generally speaking, these houses are not satisfactory on account of the class of people who live in them, the want of supervision, and the construction of the buildings. Four of these places have been Public Houses, the majority being at the time they were licensed of the lowest class.

The Local Act of 1921 gave the Local Sanitary Authority power to grant yearly licences for keeping of Common Lodging Houses. During the year the three licences were renewed. The three lodging houses are buildings which were originally used for other purposes.

Houses Let in Lodgings.

There are 33 houses in Burnley registered as Houses Let in Lodgings, being a decrease of nine on the number for the previous year.

The Byelaws relating to houses let in lodgings, which were made in 1898, were repealed, and new Byelaws came into operation on 1st February, 1935. These new Byelaws follow closely the Ministry of Health Model Byelaws Series XIII.b. Clause 4 of the new Byelaws provides that—

"An occupier of a lodging-house shall not knowingly permit any room wholly or partly used as a sleeping apartment to be occupied at any one time by a greater number of persons than will allow forty square feet of floor space for each person of an age exceeding five years and thirty square feet of floor space for each person of an age not exceeding five years.

Provided that if the average height of the room is less than eight feet the floor space above specified shall be increased in the proportion of one-eighth for every foot or part of a foot by which the average height falls short of eight feet."

The 33 houses mentioned are divided into 165 separate tenements, which are for the most part let furnished. These tenements have the following accommodation:—

One-roomed	156
Two-roomed	7
Three-roomed	2

165

In the summary of work done by the Sanitary Inspectors it will be seen that 583 visits have been paid to the furnished rooms during the year. Regular inspection is necessary to ensure that the tenants keep the rooms clean. Nine verbal and nine letter notices were given, and three legal notices were served.

Total visits to 165 Houses Let in Lodgings Total defects found Defects brought forward from 1933 Total defects remedied	588 25 2 25
The 25 defects found were as follows:—	
Dirty Floors, Walls, etc.	2
Linewashing overdue	2
Defective W.C's.	3
Defective Drains	7
Defective Bins	1
Defective Roofs	2
Dampness	3
Other Defects	5
	_
	25
	_

OCCUPANTS.

On making an informal census at the end of the year, it was estimated that 322 persons occupied the furnished rooms. This represents 1.9 persons per tenement and 1.8 persons per room.

Adults—Males	156
Females	108
Infants under 1	5
Children 1 to 12	53
	322

OFFENSIVE TRADES.

The Offensive Trades, as laid down in Section 112 of the Public Health Act of 1875, are:—

Blood Boiler. Fellmonger. Tallow Melter. Bone Boiler. Soap Boiler. Tripe Boiler.

In addition to these trades, which require the permission of the Local Authority before they can be practised, the Burnley Act of 1871 requires that Marine Store Dealers shall possess a licence from the Local Authority to carry on their business.

In 1911 the following Offensive Trades (by Order under Section 51 of the Public Health Acts Amendment Act, 1907) were added to the above list:—
Gut Scraper.

Tanner.

Fish Fryer.

anufacturers of Manure from Fish Offal. Blood or other nutrescible ani

and Manufacturers of Manure from Fish Offal, Blood or other putrescible animal matter.

In 1934, the following Offensive Trades (by a similar Order, which came into operation on 6th August) were added to the list:—

Blood Drier, Leather Dresser, Fat Melter, Fat Extractor, Glue Maker, Size Maker, Rag and Bone Dealer.

Byelaws for the Regulation of all the above-mentioned Offensive Trades were made in 1934, and came into operation on 1st February, 1935.

The following is a list of the Offensive Trades carried on in Burnley:—

Marine Stores	5
Tripe Boilers	3
Fat Melters	3
Gut Scrapers	2
Bone Boiler	1
Fellmonger	1
Tanner	1
Fish Fryers	135
	151

464 visits of inspection were made to premises where Offensive Trades are carried on.

General supervision is maintained over the premises where Offensive Trades are carried on, with the result that generally very little nuisance arises in the neighbourhood of these premises. Three statutory notices were served during 1934, and in 33 cases verbal reminders were given and 23 informal notices were sent with regard to 44 defects.

Rag Flock Acts, 1911 and 1928.

No action has had to be taken under these Acts.

Stable Middens.

There are 164 stable middens in Burnley (11 less than in the previous year) and nearly the whole of these are emptied at least once a week.

2,183 visits were paid to manure pits by the Inspectors. 17 preliminary notices were sent, and 17 verbal notices were given, referring to 35 defects, principally accumulations of manure, dirty yards and drains. In most cases the nuisance was at once abated; in no case was it necessary to serve a legal notice. The manure pits were sprayed on 3,662 occasions with the object of destroying the larvæ of flies.

INSPECTION OF FACTORIES AND WORKSHOPS.

Under the Factories and Workshops Acts, 1901 and 1907, it is the duty of the Local Sanitary Authority to enforce the sanitary provisions relating to these places.

Number of Factories and Workshops on register at end of year:-

Factories	336
Bakehouses	291
Milliners and Dressmakers	207
Woodworkers	50
Tailors, Shoemakers and Cloggers	161
Metal Workers	58
Sundries	167
Total	1,270

The number of factories and workshops registered varies during the year as the figures relating to workshops and bakehouses are constantly changing, especially the class of workshop which includes dressmaking. The number of bakehouses is also constantly changing, for a bakehouse must be registered if it is a place "in which are baked bread, biscuits or confectionery from the baking or selling of which a profit is derived." This definition includes in Burnley a great number of small grocers' and confectioners' shops.

Factory Inspection:	
Number of Inspections	164
Defects found	43
Legal Notices served	3
Informal Notices sent	22
Verbal Notices	16
List of Defects:—	
Water Closets and Urinal Defects	11
Defective Drains	8
Troughs and Spouts	13
Others	11
	_
Total	43
Workshops (other than Bakehouses) :—	_
Inspections	361
Legal Notices served	3
Informal Notices sent	18
Verbal Notices given	34
Defects Found :-	
Defective Water Closets	12
Dirty Workshops	9
Defective Drains	11
Defective Eaves and Spouts	10
Defective Ashpits and Bins	2
Other Defects	15
	_
Total	59

The following is a copy of a return required by the Home Office:-

Annual Report of the Medical Officer of Health for the year, 1934, for the County Borough of Burnley.

On the administration of the Factory and Workshop Act, 1901, in connection with Factories, Workshops and Workplaces.

I.—Inspection of Factories, Workshops and Workplaces, including Inspections made by Sanitary Inspectors or Inspectors of Nuisances.

Premises.	Number of							
Premises. (1)	Inspections. (2)	Written Notices. (3)	Occupiers prosecuted. (4)					
Factories	164	25						
Workshops	1,167	50	_					
WorkplacesOther than Outworkers' premises)	- 1	_	_					
Total	1,331	75						

2.—Defects found in Factories, Workshops and Workplaces.

	Nı	umber of Defe	ects.	Number of
Particulars.	Found.	Remedied.	Referred to H.M. Inspector.	offences in respect to which Prose- cutions were instituted.
(1)	(2)	(3)	(4)	(5)
Nuisances under the Public Health Acts:—*				
Want of cleanliness	10	10	_	_
Want of ventilation	_	-	-	_
Overcrowding	-	_	· -	_
Want of drainage of floors	-			_
Other nuisances	110	108	3 —	
insufficient		D	_	_
Sanitary unsuitable or defective not separate	31	27	_	-
for sexes		_	_	_
Offences under the Factory and Workshop Acts:— Illegal occupation of underground				
bakehouse (s. 101)		_	_	_
Other offences (Excluding offences relating to outwork and offences under the Sections mentioned in the Schedule to the Ministry of Health (Factories and Workshops Transfer of Powers) Order, 1921)	60	60		
Total	211	205		

^{*}Including those specified in Sections 2, 3, 7 and 8 of the Factory and Workshop Act 1901, as remediable under the Public Health Acts.

FACTORIES AND WORKSHOPS.

Particulars of matters referred by the Factory Inspector and action taken by the Health Department.

	De	fects referred by Fac	ctory I	nspecto	or.	Action taken by Health Department.
(a)	Fac	ctories.				
		Six.				
	1.	Defective closets				Remedied by informal action.
	2.	do.				do.
	3.	do.				do.
	4.	do.				do.
	5.	do.				Still being dealt with.
	6.	do.	•••		•••	do.
(b)	Wo	orkshops. Five.				
	1.	Limewashing of ba	kehous	se over	due	Remedied by informal action.
	2.	do.				do.
	3.	W.C. defects				do.
	4.	do.				do.
	5.	Bakehouse without facilities or drink	washi	ing	•••	Work discontinued, building demolished.

CANAL BOATS ACTS, 1877 and 1884.

Report of the Burnley Urban Sanitary (Registration) Authority on the Administration of the Canal Boats Acts during the year 1934.

The Inspector under the Acts is Mr. Richard Jump, the Sanitary Inspector, whose office is at 27, St. James's Street, Burnley, and whose salary is inclusive and unapportioned.

The number of boats inspected during the year was 20, against 24 in 1933.

Two boats did not conform in all respects with the Acts and Regulations. In these cases painting was required, and there was also leakage into the cabins. I.etters were sent and in one case the defects were remedied, and in the other the boat was withdrawn from service.

In almost all cases the boats are occupied by men for a few nights on journeys, and who have homes elsewhere, only two women and one child under school age (an infant in arms) being present on the boats inspected.

No boats have been added to or removed from the Register during the year. The number now on the Register is 25.

No cases of Infectious Diseases have occurred on the boats, and no boats have been detained for cleaning or disinfection.

During a portion of the year, through traffic was interfered with by drought in some districts.

The Inspector has been received with courtesy in every case, and the required information has been readily supplied, and is gratefully acknowledged.

Canal Boats Acts, 1877 and 1884.

STATISTICAL STATEMENT to the 1934 Annual Report of the Burnley Sanitary (Registration) Authority.

Have you Hospital Accommodation for any case of Infectious Disease met with on a canal boat in your Sanitary District? Is the Inspector's remuneration inclusive with pay for other duties? Yes. If special, how much? Number of boats added to Register in 1934 0 Number re-registered owing to structural alterations 0 Number re-registered owing to other reasons 0 Total number registered to 31st December, 1933 147 Total number of registrations cancelled ... 122 Actual number of boats on Register at 31st December, 1934 25 Number of boats inspected in 1934 20 ... Number of boats conforming to the Acts and Regulations 18 Number of boats infringing the Acts and Regulations ... 2 Total number for which the cabins were registered 96 Total number occupying cabins 45 Details of occupation: — Male adults 42 Female adults 2 Children (under school age) 1

mber of Cas met with.	es Details showing numbers infring	ging in	respect	to:—	Nu	mber of Case remedied.
	Registration					
	Notification of change of Master					
	Absence of Certificate					
	Certificate not identifying owner v	vith bo	at			
	Marking					
	Overcrowding				•••	
	Partition (Reg. 8.b.11)					
	Females over 12 improperly occup	ying				
	Cleanliness					
2	Painting					1
	Ventilation					
	Dilapidation					
	Removal of bilge water					
	Without pump					
	Refusal of admittance to Inspecto	r				
	No proper water vessel					
	Without requisite double bulk hea	ıds				
	Non-notification of Infectious Dise					
	Number of boats detained for clea	nsing (not for	I.D.)		
		0 ,		,		
2						1
Number	of Legal Proceedings taken					
Number	of Printed Notice Forms sent					2
Number	of Notices attended to					1
Number	still corresponding about					

General Inspection of Working Class Dwellings.

2,057 visits have been paid to back-to-back and single houses, 588 to furnished rooms, and 12,924 to other dwellings. Sixteen were suspected of being overcrowded, and six were found to be actually in that state when visited.

Dirty Houses.

Eighty were suspected of being dirty, and 31 were found to be so on inspection. In no case was it found necessary to serve legal notices to get the nuisance remedied.

Sanitary Accommodation.

The total number and types of closets in the Borough at the end of 1934 and the previous year, are as follows:—

]	Dec. 19 <mark>34</mark>	Dec. 1933.
Clean Water Closets	 •••		13,502	 13,031
Waste Water Closets	 		18,238	 18,270
Latrines (437) with closets	 		1,892	 1,977
Privies	 		213	 217

Of the above numbers, the following is the Closet Accommodation of dwellinghouses at the end of 1934:—

							Houses.
Houses each	n having	sole u	se of one	clean water o	loset	•••	7,405
,,	,,	,,	one	slop water cle	oset		16,852
,,	,,	,,	two	water closets		•••	1,597
Houses hav	ing joint	use of	f clean wa	ter closets			363
,,	,,	,,	slop wat	er closets		•••	277
Houses hav	ing joint	use of l	latrine (tr	ough) closets	(2 11 latr	ines,	
with a	total of	937 clo	sets)				1,415
Houses each	n having	sole u	se of one	privy closet			126
Houses hav	ing joint	use of	f one priv	y closet			2
							28,037
			-				

In only two dwelling houses (apart from farms) having clean water closets, do the closets drain to cesspools.

The above numbers include dwellings which are in the Corporation's fiveyear Slum Clearance programme, but which, at the end of 1934, had not been vacated and demolished.

A very large number of the older houses in the Borough have closets which, although on the water-carriage system, are not flushed with clean water with a cistern for each closet. The majority of such houses have closets which are flushed by waste-water from the domestic sink or what is commonly known as latrine or trough closets, i.e., a row of closets flushed from one large cistern. A relatively small proportion of the houses have closets not on the water-carriage system, known as tank closets.

All closets not individually flushed on the clean water system are objectionable, and the building byelaws prohibit the erection of closets, for new houses, not on the separate cistern clean water system of flushing, except where there is no sewer within reasonable distance.

The objections to the waste water closet are that the closet pan is cylindrical, with a long distance between the seat and the bottom of the closet. The closet therefore is easily fouled and difficult to keep clean. The tippler, which is usually present to catch the waste water and hold it until there is sufficient to flush the closets, very easily gets out of order. As the closet pan cannot be flushed immediately after use, foul odours are liable to pervade the closet.

The latrine or trough closets are fixed generally in rows of 4, 6 or 8 at the end of a block of houses. The objections to these are that the pans cannot be flushed immediately after use, and therefore foul adours emanate from them. The long cylindrical pans are easily fouled, and difficult to keep clean. The flushing water only clears the horizontal channel connecting the series of closet pans and any excreta on the vertical cylindrical pans is not flushed away. This gaves rise to foul odours and is a source of danger on account of disease germs from the excreta being possibly borne by flies to foodstuffs.

Tank privies are insanitary because the excreta accumulates for a week before being removed, and then has to be conveyed from the privy in a night-soil cart and either buried or used as manure. Human excreta used as manure in kitchen gardens, etc., has been the source of infectious diseases, such as typhoid fever, by the contamination of the garden produce with disease germs. Flies also carry infection from such privies. No matter how carefully the excreta is covered by a deodorant, it is difficult to prevent objectional effluvia.

In considering any proposals for the abolition of insanitary closets, it has to be borne in mind that the five-year Slum Clearance programme, when completed, will effect a clearance of approximately 1,000 latrine and waste water closets, and it would not be wise to require the owners of houses scheduled for demolition to carry out any conversion of closets.

Of the 127 tank closets in dwelling houses, 100 are not within reasonable distance of sewers, and there is no legislation under which owners can be required to convert these. This leaves only 27 tank closets in dwelling houses which can be converted.

By the Burnley Corporation Act, 1925, Section 54, where there is a sufficient water supply and sewer reasonably available, the Corporation may require any pail closet to be converted into a fresh water closet, the Corporation bearing part of the expenses incurred by the owner (not being less than one-half therof) as they may consider just and proper. If the owner fails to comply with a Notice to convert a closet, the Corporation may do the work and recover part of the cost.

Similar provision for the conversion of pail closets is made in Section 39(4) of the Public Health Acts Amendment Act, 1907. Under this section the whole cost is borne by the owner. If, however, the Local Authority carries out the conversion in default of the owner, the whole expense is borne by the Authority.

It would appear, therefore, that in order to encourage the conversion of tank closets, it is desirable for action to be taken under the Local Act.

There is at present no legislation which enables the Local Authority to convert slop-closets into fresh water closets. If, however, the Corporation can satisfy the Minister of Health that the circumstances of the district are such as to render it necessary or expedient to convert slop-closets to the fresh water system, an Order may be declared making Section 39 of the Public Health Acts Amendment Act, 1907, applicable to slop-closets.

There is at present no legislation which enables the Local Authority to convert latrine closets into separately flushed closets. These latrines are frequently shared by two or more houses, and where the number is insufficient, additional closets on the separately flushed system could be obtained under Section 36 of the Public Health Act, 1875. Generally, however, these latrines are connected with rows of back-to-back houses and there is seldom room to put in additional closets. A considerable number of the latrines will be abolished as the five-year Slum Clearance programme progresses.

It is hoped that, during 1935, a commencement may be made to convert some waste water closets to the clean water system, and to abolish the 27 tank closets which are within reasonable distance of sewers.

There has been no alteration during 1934 in the number of public conveniences and lavatories provided throughout the town.

Inspection of Bakeries.

The majority of the defects found in bakehouses are those which infringe the Factory and Workshop Act, 1901, by failing to renew lime-washing once at least in every six months. Many occupiers omit to lime-wash their bakehouses until reminded by the Sanitary Inspectors.

The condition of the bakehouses is satisfactory on the whole and a high standard of cleanliness is maintained. Only one bakehouse was found to be unsatisfactory in this respect. DETAILS OF INSPECTION AND DEFECTS FOUND.

Number on Register		 • • •			305
Number of Inspections r	nade	 			806
Verbal Notices		 			76
Informal (written) Notice	es	 			22
Legal Notices		 			7
Defects:—					
Required Lime-Washing		 			60
Defective Water Closets		 			8
Defective Drains		 			7
Defective Ashpits and A	shbins	 		** *	10
Defective Spouts and Ea		 			9
Dirty State		 			1
Other Defects		 			14
		Total	•••	•••	109

Fish and Chip Shops.

In 1911, the business of fish frying was declared to be an offensive trade in Burnley. During 1934, the Sanitary Inspectors made 303 visits of inspection to the 135 premises licensed for fish frying. The general structural condition of these fish and chip shops is good, and the standard of cleanliness maintained has been satisfactory. Of the 33 defects found during the year, 5 were drainage and 12 water closet defects; 4 had reference to the cleanliness of the premises and the remainder were structural defects.

Ice Cream Shops.

Registration of ice cream shops is not compulsory in Burnley. The Burnley Corporation Act, 1908, lays down certain conditions which must be adhered to in the manufacture and sale of ice cream, but in the absence of compulsory registration it is frequently difficult to ascertain where ice cream is being manufactured and so the conditions of manufacture are difficult of enforcement. The business of ice cream manufacture is naturally to some extent seasonal and many only run the business for a few weeks at a time. It is impossible, therefore, to state with any accuracy the number of ice cream manufacturers. During 1934, 73 visits of inspection were made to premises where it was known or ascertained that ice cream was being made or sold. The premises where the ice cream was being manufactured and stored were clean, but in 2 instances structural defects were found.

Satisfactory supervision cannot be maintained until there is compulsory registration of premises where ice cream is manufactured and sold, and a legal definition and standard.

RATS AND MICE (DESTRUCTION) ACT, 1919.

The Sanitary Inspectors, in the routine visits to premises, make enquiries as to the presence of rats or mice, and, where necessary, offer suggestions.

Frequent visits have been paid by the Officer appointed under the Act to Piggeries, Poultry Runs, Allotments, Refuse Tips, etc., with reference to the prevalence of rats.

355 applications were received by the Public Health Department for advice and assistance in clearing premises of rats, and 401 boxes of suitable rat poisons have been issued. The Officer paid 57 visits to places concerning which complaints had been received. No notices were served.

As in previous years, intensive effort was made to create additional interest in rat repression during the National Rat Week. Advertisement and articles were inserted in the local press calling attention to the dangers and destructiveness of rats and mice, and copies of the Ministry of Agriculture Bulletin on "Rats and How to Exterminate them" were distributed. 161 applications for assistance were received during Rat Week, as against 71 in the previous year.

Sanitary Conditions of Schools.

All the schools in the town are supplied with water from the town's mains.

A report on the sanitary condition of the schools is given in my Annual Report for 1934 as School Medical Officer. The Sanitary Inspectors made 365 visits to schools, mainly to inspect the sanitary conveniences.

It has not been necessary to close any school in the Borough on account of Infectious Disease during 1934.

Section 4.

Housing.

Except for houses in the residential districts and houses built within the last thirty years, houses are generally in terrace formation. Most of the prewar houses are stone built.

At the end of 1934 there were 28,037 dwelling-houses in the Borough, of the following types:—

Houses	with through ventila	tion		 	24,037
Combine	ed houses and shops			 	1,907
Houses	without through ven	tilatio	n:		
(a)	Back-to-Back			 	1,638
(b)	Single houses			 	311
(c)	Single-roomed dwel	lings		 	116
(d)	Cellar dwellings			 	20
Vans an	d Sheds		•••	 	8
	Tot	al		 	28,037

Of the 20 cellar dwellings only 9 have the floor surface more than three feet below the street.

Houses Inspected and Recorded.

Two sanitary inspectors devote the whole of their time to inspections of working class dwellings.

Up to the end of 1933, there were 14,233 houses inspected and recorded under the Housing Consolidated Regulations, 1925. During 1934 a further 69 houses were recorded, making a total of 14,302 up to the end of 1934. During 1934, 1,385 houses previously inspected and recorded were re-inspected.

The Housing Inspectors made 3,052 re-visits in connection with defects found in the houses inspected.

 $3\cdot2\%$ of the houses inspected were found to be overcrowded. Particulars of the types and sizes of the houses inspected are given in Appendix 6.

General Action taken as regards Unfit Houses.

Houses rendered fit by informal action and notices under Section 94 of the Public Health Act, 1875—394. Houses rendered fit by informal action and notices under Section 17 (1) of the Housing Act, 1930—540.

HOUSING WITHOUT ADEQUATE THROUGH VENTILATION.

i.e. Back-to-Back and Single Houses.

Position at Five-year periods for the last 24 years and at 31st December, 1934.

TALLY OF LAND	
the single-roomed dwellings	Total No. of Back-to-Back and single houses closed or demolished during the previous five year period.
,	1905-1909—Nil.
2,371	1910-1914—Nil.
2,359	1915-191912
5 2,349	1920-1924—10
3 2,170	1925-1929179
7 2,085	1930-1934 — 85.
	*
ack and single houses to be dealt v	with in remainder of 5 1452
9	hich will remain after 336
	ho. of houses, single houses, single-roomed dwellings and cellar dwellings. 2,323 (Not including single houses) 2,371 2,359 3,2,170 7,2,085 ack and single houses already includate been included in Clearance Orders

Slum Clearance Programme.

The Corporation's Programme of Slum Clearance under the Housing Act, 1930, includes 84 Clearance and Improvement Areas which, together with individual unfit houses, involves the demolition of 1,859 dwellings. The Council have resolved to build a house for each dwelling demolished.

At the end of 1934 Clearance, Improvement and Demolition Orders had been made requiring the demolition of 601 houses. This necessitates the displacement of 2,105 persons, of whom 604 had been rehoused by the Corporation at the end of 1934.

Before the Corporation's Programme is completed, Clearance and Improvement Areas have to be dealt with between the years 1935 and 1938,

which will involve the demolition of a further 1,258 houses. The total number of persons to be rehoused under the remaining portion of the programme is estimated at 4,959.

On more detailed inspection by the Housing Inspectors a considerable number of individual unfit houses or parts of houses, which require to be dealt with by demolition or closure, have been found, which were not included in the original five-year programme.

To ensure that new Council houses shall so far as possible be maintained free of vermin the Corporation undertakes the removal, and disinfestation by cyanide gas, of the household effects of tenants transferred from unhealthy areas. One of the Health Visitors is appointed to advise tenants, transferred from unhealthy areas to new Council houses, in regard to the use of household appliances and the care of property.

The following tables summarise the progress of the Slum Clearance Programme:— $\,$

CLEARANCE AND IMPROVEMENT AREAS DEALT WITH IN THE YEARS 1931 TO 1934.

				T) the Are	ypes of Pre ns as Confa	mises to be I med by the	Demolished in Ministry of I	lealth			Date of	Dade Order			
Date of Representat		Acreage	Back- to-Back Houses	Single Houses	4 -	, Through Houses	Combined Houses and Shops	Other Premises not Dwellings	Total Premises	Population of Area	Ministry of Fleedth Inquiry	Confirmed by Ministry of Health	Property Exchided by Ministry of Health	for Vacation	Fre C
24/11/1931	Hill Top No. 1		13			2	_		15	71	23/5/1933	15/8/1933		9/1/1934	-
24/11/1931	do. No. 2	812	33	8	_	9	1	1	52	921	23/5/1933	15/8/1993	_	9/2/1934	7(1
14/3/1932	Park No. 1	12	4	2	2	I		the state of the s	9	40	10/1/1034	1 28/3/1934		28/9/1934	221
14/3/1932	do. No. 2	10	4			dan Pa	1	-		26	10/1/1934	28/3/1030		28/10/1934	9
14/3/1932	do. No. 3	. 69	17	3	14	8	1	-	43	137	10/1/1934	28/3/1934	1 Lock-up Shop and 2 Through Honses	28/2/1935	57
	do. No. 4	-41	3				_	-	3	î	10/1/1904	28/3/1934	5 Back-to Back Honses and 1 Through Honse	28/11/1934	3
	do. No. 5	1:07	43	1		ũ	2		51	191	10/1-1931	28/3/1934	1 House and Shop and 17 Back-to-Back Houses	28/5/1935	52
	Park Improvement	-37	4		-	-1			8	23	-		-	6/6/1934	
	. Plane Tree		41	8	7	8	1	ı	66	2011	10/1/1931	28/3/1914		28/2/1935	
	Mount Pleasant No. 2	-03	3			_			3	î	11/9/1934	22,11/1934		11/11/1935	114
)/1/1934		1:31	52	11		29	1		93	333	11/9/1934	22/12/1934	House and Shop and Back-to-Back House	11/2/1936	
1/1934		-04			-	3	_		3	8	11/9/1934	20/12/1904	2 John House	11/0/11/00	
·/1934		·421	21	_		10)		-	31	92	11 9/1934	92/12/1934		11/2/1936	
/1934	do. No. 3	-318	24			1			25	81	11/9/1934	22/12/1934	•	11/2/1936	
	Thorneybank No. 1	-49	42						40		= 18/12/1934	-		11/2/1936	
6/ I 934	do. No. 2	-26	11	_	4	-	-		15	47	18/12/1934	28,3/1935		15/11/1935	_
1934	Cow Lane	-72	30	2		10	2				THE PARTY NAMED IN COLUMN TWO	23/3/1935	1 House and Shop 2 Back-to-Back Houses	15/11/1935	
0/1934	Union Street No. 1	000						- 1	44	1-10	18/12/1904	23/3/1935	1 Storeplace 1 Workshop 0 Back-to-Back Houses	15/11/1935	-
0/1934		363	17			4			22	117	19/2/1935	18/4/1935		13/12/1936	
	do. No. 2	.868	15	I	-British day or	26	2	1	45		19/2/1935	18/4/1935	2 Stables 4 Garages	13/12/1936	

Note.—In respect of the back-to-back houses excluded from the areas, undertakings were given by the owners in some cases to convert them into through houses, and in the remainder to use

INDIVIDUAL UNFIT HOUSES DEALT WITH SINCE 1931, UNDER SECTIONS 19 AND 20 OF THE HOUSING ACT, 1930.

	Number of		vith under Section 19	Number with m	of Houses Dealt nder Section 20
Year of	Demolition Orders	Und	lertakings Accepted		
Representation	Confirmed	(a) To Make Habitable	(b) To Convert into Premises other than Dwellings	Closing Order Confirmed	Undertaking Accepted to make habitable
1931	3				
1932	_	_		-	
1933	-		Фійліцер	ā-i	
1934		_	Armount .	1	_
	1	2	3	7	



ACTION IN RESPECT TO UNHEALTHY AREAS AND DWELLINGS.

	Persons re-housed, or to be re-housed, by the Corporation	610 (Approx- imate)	2,105	4,437
Infit Houses	Number of Persons displaced, or to be displaced	200	21	133
Individual Unfit Houses	Number represented, or to be represented	100		
reas	Number of Persons displaced, or to be displaced	630	2,084	4,304
Clearance and Improvement Areas	Number of Premises demolished, or to be demolished in the Areas	207	575	1,439
arance and In	Total Acreage	€:-3	9.35	23.03 (Approx-imate)
Ü	Number of Areas dealt with, or to be dealt with	1	19	
		Confirmed during the 21 years 1910 to 1930	Housing Act, 1930. Confirmed during the 4 years 1931 to 1934	Housing Act, 1930. *Proposed Action during 1935 to 1938

*The proposed action during 1935 to 1938 is somewhat in excess of the action originally proposed in the five-year programme.

HOUSING STATISTICS. YEAR ENDED 31st DECEMBER, 1934.

	NUN	MBEI	R OF NE	EW HOU	SES E	ERECT	ED D	URIN	G TH	E YEA	R.	
(a)	Total N	lumbe	er (includ	ing (b))								423
		(1)	By Corp	oration								224
		(2)	By priva	ate enterp	orise							199
(b)	With St	tate A	Assistance	under H	ousing	Acts						224
			1.	UNFI	T DW	ELLIN	GHOU	ISES.				
(I.)	Inspection:— (1) (a) Total number of dwellinghouses inspected for housing defects											
	(1) (a)		al numb der Publi		_		_	10	r hous	ang de 	iects	1,96
	Nu	mber	of inspec	tions ma	de for	the pu	rpose				•••	5,789
	(2) (a)	whi	nber of och were in	spected a		•				. ,	,	1,454
	(b)	Nur	nber of in	spections	s made	for the	e purpo	se				4,500
	, ,	inju mber prec	of dwel rious to l of dwell ceding su or humar	nealth as inghouses b-head)	to be u s (excl found	unfit fo usive o	or huma of those	n hab e refer	itation red to	under	the	*359 1,188
	*358 are	e incl	uded in C	learance	Areas.							
(11.)		Y OF	Defects	DURING	THE	YEAR '	WITHOU	t Ser	VICE (оғ Гоғ	RMAL	
	Number		defective rmal acti		-						e of	765
111.)	Action	UND	er Statu	TORY Po	WERS	DURIN	G THE	YEAR:	-			
	A. Pro	oceedi	ngs unde	r Section	s 17, 1	8 and	23 of	the Ho	ousing	Act, 1	930:	
		(1)	Number served re	of dwell			respect	of w	hich n	otices ·	were 	117
		(2)	Number service o	of dwel			hich w	vere re	endere	d fit a	after	
			(a)	By Own	ers		•••					91
			(b)	By local	Autho	rity, in	defaul	lt of ov	vners			9

В.	Proceedings under Public Health Acts:—							
	(1) Number of dwellinghouses in respect of which notices were served requiring defects to be remedied	98						
	(2) Number of dwellinghouses in which defects were remedied after service of formal notices:—							
	(a) By Owners	69						
	(b) By Local Authority, in default of owners	None.						
c.	Proceedings under Sections 19 and 21 of the Housing Act, 1930:—							
	(1) Number of dwellinghouses in respect of which Demolition Orders were made	1						
	(2) Number of dwellinghouses Demolished in pursuance of Demolition Orders	None.						
D.	Proceedings under Section 20 of the Housing Act, 1930:—							
	(I) Number of separate tenements or under-ground rooms in respect of which Closing Orders were made	None.						
	(2) Number of separate tenements or under-ground rooms in respect of which Closing Orders were determined, the	N T						
	tenement or room having been rendered fit	None.						

Section 5.

Inspection and Supervision of Food.

A whole-time Veterinary Officer is employed on the inspection and supervision of food supplies. His duties include work under the Milk and Dairies Amendment Act, 1922, the Milk and Dairies Order, 1926, the Tuberculosis Order, 1925, the Public Health (Meat) Regulations, 1924, etc. Samples of milk and other foods for bacteriological examination and for analysis under the Food and Drugs (Adulteration) Act, 1928, are obtained by the Sanitary Inspectors.

MILK SUPPLY.

Tuberculosis Order, 1925.

During the year 193 samples of mixed and unmixed milk have been collected from farms within and without the borough and submitted to bacteriological examination for the presence of tubercle bacilli.

The result of the bacteriological examination of these milks shows that 9 of them proved positive, this being equal to a percentage of 4.6.

In the case of a cow housed within the borough being suspected of producing milk containing tubercle bacilli and in which tuberculosis cannot be definitely diagnosed by clinical examination, a sample of milk is collected and the animal is isolated from the rest of the herd until the result of such sample is reported upon. With regard to a cow housed outside the borough, if the examination reveals tubercle bacilli, the Medical Officers of Health of the County and the District in which the farm is situated are notified immediately.

The following is a summary of the examinations of milk samples carried out during the year:—

(1) Collected in the town from farms within the borough:

					Percentage of
	No. of			N.	lilks containing
	Samples.	Positive.	Negative.	T	ubercle Bacilli.
Mixed Milk	 60	 3	 57		5.0

Following the discovery of tubercle bacilli in mixed samples, six samples were taken from individual suspected cows, of which two were found to be positive.

(2)	Collected	in the	ne town	from	farms	outside	the	borough:
-----	-----------	--------	---------	------	-------	---------	-----	----------

					Percentage of	f
	No. of			M	lilks containin	ng
	Samples.	Positive.	Negative.	T	`ubercle Bacill	li.
Mixed Milk	 `127	 4	 123		3.1	

During the year three cows were condemned and destroyed under the Tuberculosis Order. The market value, total compensation paid and salvage after deduction of expenses incurred in and for purpose of salvage are as follows:—

	Total	Salvage after	Net Cost
Market Value.	Compensation.	deducting Expn's.	to Corporation.
£24 0s. 0d	£6 15s. 0d.	£2 10s. 0d	£4 5s. 0d.

Milk and Dairies Amendment Act, 1922.

The numbers of purveyors of milk registered to sell milk within the borough are as follows:—

Total number on the register on 1st January, 1934	 •••	 836

Number of new licences granted during 1934:—

(a) To sell wholesale new milk (loose)	10
(b) To sell wholesale new and sterilised milk in sealed bottles	2
(c) To retail new milk (loose)	47
(d) To retail new and sterilised milk in sealed bottles	51
	110
Number of licences cancelled during 1934	90
Total number on the register on 31st December, 1934	856
The number on the register consists of the following:—	
Licences to sell new milk wholesale	74
Licences to sell new and sterilised milk wholesale in sealed bottom	iles 7
Licences to retail new milk (loose)	236
Licences to retail new and sterilised milk in sealed bottles	539

856

Of the 775 retail licences, 603 are for the sale of milk from shops.

The milk sold from these 603 shops is as follows:—

New milk (loose)	 		•••		 47
New milk in sealed bottles	 	•••		• • •	 17
Sterilised milk in sealed bottles	 				 539

603

MILK (SPECIAL DESIGNATIONS) ORDER, 1923.

Licences to produce and retail pasteurised milk were granted to the Burnley Co-operative Society on 8th December. This Society installed, during 1934, a modern pasteurising plant in their dairy premises, and the pasteurised milk is retailed from milk floats, hand carts and 44 shops. Milk of other designations is not produced within the borough, but 2 supplementary licences and 3 dealers' licences to sell Grade A milk within the borough were granted during 1934.

MILK AND DAIRIES ORDER, 1926.

During the year one person residing within the borough has been registered as a Cowkeeper.

Number of	Farms within the Borough		40
,,	Visits to the Farms within the Borough		88
,,	Re-Visits to the Farms within the Borough		16
,,	Examinations of Cattle within the Borough	•••	1,225
,,	Visits to Dairies within the Borough		8
,,	Milk Shops	•••	603
,,	Visits to Milk Shops		290
,,	Retail and Wholesale Purveyors		856

INSPECTION OF DAIRIES.

There are two dairies within the borough, to which milk is brought for distribution. In one of these the milk is pasteurised before being retailed. These premises have been inspected periodically.

Inspection of Cowsheds.

There are 40 farms within the borough, of which 33 are for the housing of milch cows; of the others, three are for the rearing of pigs and calves, one for the housing of dogs, and three are unoccupied.

104 visits have been made to the above premises and 1,225 inspections of cattle made.

DISEASED UDDERS FOUND IN CATTLE INSPECTED ON FARMS.

	Tubercle	Atrophy	Mastitis	Fellon	Total
1934	1	5	5	1	12
1933	_	3		<u> </u>	3

There are 58 cowshed premises on the farms, and the following is a report on the sanitary conditions of them:—

		Light.	V	entilati	on.	Drains.		Floors.	Air	Space.
Good	 	55		56		58	•••	55		58
Fair	 	3		2				3		
Bad	 							_		

There is a good and plentiful supply of water on all the farms. Each dairy farm has a suitable building for the storage of milk and milk vessels.

It is satisfactory to report that dairy farmers within the borough continue to maintain a high standard of cleanliness of their cowsheds, milk stores and utensils. When notices have been served, the requirements have been readily complied with.

Contamination of Milk.

Reports on the number of samples of milk examined chemically and bacteriologically and the amount of adulteration and contamination of milk will be found in the sections of this report dealing with work carried out under the Food and Drugs Adulteration Act, 1928, and the Public Health Laboratory.

Public Health (Meat) Regulations, 1924.

These Regulations have been carried out in a satisfactory manner. It was necessary to serve notices in respect of the following:—

	No. of Notices.
Cleansing the interior of refrigerator	 1 .
Cleansing of premises	 2
Repair of premises	 1
Provision of receptacles for bones, etc	 2
Wearing of clean washable head-covering and overalls	 2
Meat not to be stored in the cellar	 1
	9

All notices were complied with.

There have been no requests for the marking of meat.

The stalls on the Market have been well protected with sheets round the sides, back and top, to prevent, as far as possible, contamination of any meat, etc., exposed for sale.

The Sale of Food Order, 1921, Part III.

Five notices were served in respect of imported meat not being properly labelled. All the notices were complied with.

Triperies and Tripe Shops.

There have been 125 visits paid to these shops, etc., and on each visit the premises were satisfactory. In only one instance was it necessary to serve a notice to have premises painted. This notice was complied with.

The food stuffs examined were, in all cases, sound, and the tubs, tanks, boxes, tins and other utensils were clean.

Public Abattoirs.

The management of the Public Abattoirs is under the supervision of the Markets Committee.

The slaughter houses, lairages, walls, floors, yard and all utensils have been kept very clean and the whole of the premises disinfected each week.

There are no private slaughter houses within the borough.

The number of animals slaughtered in the Public Abattoirs during the year under review shows a reduction of 3,023 on the number for 1933, and a reduction of 6,014 on the number for 1932. There is reason to believe that the amount of meat killed and dressed in private slaughter houses in adjoining districts, where meat inspection cannot be so rigidly applied, and brought direct to shops in the borough, is increasing. This necessitates careful inspection in butchers' shops of meat which is known not to have been slaughtered in the Public Abattoirs.

MEAT INSPECTION.

Number of Animals Slaughtered at the Abattoirs.

	-	Beasts	Sheep	Lambs	Calves	Pigs	Totals
1934		4,481	2,930	29,660	346	3,737	41,154
1933		4,500	3,173	32,473	248	3,783	44,177

Carcases Detained and Submitted to a Detailed Examination during 1934.

		Beasts	Sheep	Calves	Lambs	Pigs	Total
Passed		3	6	11	7	204	231
Candamuad	Local	12	3	1	1	8	25
Condemned	From other Areas	13	10		5	1	29
	abmitted to detailed	28	19	12	13	213	285

Causes of Rejection.

	Beasts	Sheep	Lambs	Calves	Pigs	Total
Jaundice	_				1	1
Wasted and Dropsical		2	3		2	7
Tuberculosis	25				3	28
Suffocated		9	3		1	13
Septic Pneumonia	- 1	·	_		2	2
Cirrhosis and Dropsy		2		_		2
Pyæmia				1		1
Totals—19 34	25	13	6	1	9	54
Totals—1933	14	10	8	5	11	48

WEIGHT OF CARCASES CONDEMNED.

	Beasts	Sheep	Lambs	Calves	Pigs	Total
1934	lbs. 12,937	lbs. 510	lbs. 182	lbs. 40	lbs. 612	lbs. 14,281
1933	6,680	295	235	176	722	8,108

TUBERCULOUS CARCASES EXAMINED AND REJECTED.

	Со	ws	Hei	fers	Bu	lls	Bull	ocks	Cal	ves	She	еер	Pi	gs ——	То	tal
	Examined	Rejected														
1934	30	18	1	1	13	3	18	3	_		_	_	190	3	252	28
1933	21	10	1		7	2	19	2	-	_	_	_	162	11	210	25

Apart from the whole carcases enumerated in the foregoing tables, portions of carcases and other foodstuffs were condemned and voluntarily surrendered, both in the Abattoirs and in other premises. The following is a list of these foodstuffs which were found not to be fit for human food:—

						T	otal W	eight.	
							lbs.		
26 Forequarter	s of Be	ef					4,212	2	
2 Forequarters	of Porl	k					70)	
Pieces of Beef,	Veal, e	etc.				•••	43	}	
Fish		•••					110)	
								-	
				Total			4,43	5	
								_	
					Т	ons. C	wt. Q	rs. J	bs.
Total weight of all carca	ises con	demn	ed			6			1
Total weight of parts					foods				
condemned						1 1	19	2	11
Total weight of ALL Mea	at and	other	foods	conde	mned —	8	7	0	12
All condemned ca	ırcases	and	parts	of ca	arcases	were	dispos	ed of	to

artificial manure manufacturers.

VISITS MADE TO DIFFERENT PREMISES FOR THE INSPECTION OF FOOD STUFFS.

No. of	Visits to	the Abattoirs		 	418
, ,	,,	Butchers' Shops		 	544
,,	,,	Fish Shops		 	431
**	,,	Fruit Shops	•••	 	520
		Wholesale Shops		 	366

of	Visits	to	Charlton's Yard				130*
,,	,,		Collinge's Yard				131*
,,	,,		Harrison's Yard				130*
,,	,,		Sunter's Yard	•••			130*
,,	,,		Stockdale's Yard				130*
,,	,,		Co-operative Society	,			57*
,,	,,		Cold Air Stores				86
,,	,,		Triperies and Tripe	Shop	s		125
,,	,,		Meat, Fish and Fru	it Ma	ırket		30
,,	,,		Cattle Market		•••		39
,,	,,		Knacker's Yard				2
							3,269
	" " " " " " " " " " " " " " " " " " "	;; ;; ;; ;; ;; ;; ;; ;; ;; ;; ;; ;; ;;))	,, ,, Harrison's Yard ,, ,, Sunter's Yard ,, ,, Stockdale's Yard ,, ,, Co-operative Society ,, ,, Cold Air Stores ,, ,, Triperies and Tripe ,, ,, Meat, Fish and Fru ,, ,, Cattle Market ,, Knacker's Yard	", ", Collinge's Yard ", ", Harrison's Yard ", ", Sunter's Yard ", ", Stockdale's Yard ", ", Co-operative Society ", ", Cold Air Stores ", ", Triperies and Tripe Shop ", ", Meat, Fish and Fruit Ma ", ", Cattle Market "	", ", Collinge's Yard ", ", Harrison's Yard ", ", Sunter's Yard ", ", Stockdale's Yard ", ", Co-operative Society ", ", Cold Air Stores ", ", Triperies and Tripe Shops ", ", Meat, Fish and Fruit Market ", ", Cattle Market ", ", "	""" """ Collinge's Yard """ """ Sunter's Yard """ Stockdale's Yard """ Co-operative Society """ Cold Air Stores """ Triperies and Tripe Shops """ Meat, Fish and Fruit Market """ Cattle Market """ """ """ """ """ """ """

* During the visits for inspection of food stuffs to the premises of these wholesale Cattle and Pig Dealers, the premises were also inspected regarding their state of repair, cleanliness and periodical disinfection. The inspections made by the Sanitary Inspectors to premises where foods are prepared are given on pages 61 and 62.

Diseases of Animals Acts.

A Swine Fever Infected Area Order, which affected the borough was in operation from 28th December, 1933, to 11th April, 1934. Under the Foot and Mouth Disease (Infected Area Restrictions) Order, 1925, the borough was included in an infected area from 19th September to 5th October, 1934.

Poultry Act, 1912.

Thirty-nine visits have been made to the Cattle Market to inspect the crates used for the storage of poultry, most of which were found to be in a satisfactory condition. During the inclement weather the birds are well protected with sheets, and no cases of overcrowding were noticed.

Sheep Scab Double Dipping Order, 1928.

This Order provides that all sheep and lambs shall be dipped in some disinfectant for the prevention of sheep scab at least twice a year. Under this Order 506 animals were dipped:—

				August.		October.
Ewes		• • •		179	•••	144
Lambs	3			109		70
Tups						4
	Total	•••	•••	288		218
Lambs		•••		109	•••	70 4 —

During the year there have been no cases under the following Orders:-

- (1) Anthrax Order of 1928.
- (2) Parasitic Mange Order, 1911.
- (3) Sheep Scab Order, 1928.
- (4) Importation of Dogs and Cats Order, 1928.

Animal Transit Order.

During the year frequent visits have been made to the Station to examine the trucks which are used for the conveyance of cattle, etc., these being generally found in good repair and clean. The cattle landing premises were also in a satisfactory condition, the pens having been washed down and disinfected several times each week.

FOOD AND DRUGS (ADULTERATION) ACT, 1928.

The administration of this Act is carried out by the Public Health Department, the Chief Sanitary Inspector being the officer appointed by the Local Authority. Samples obtained for chemical analysis are submitted to the Borough Analyst. Samples for bacteriological examination are submitted to the Bacteriologist at the Public Health Laboratory.

SAMPLES TAKEN DURING 1934.

	For	RMAL	Info	RMAL	То	OTAL
Nature of Sample	Genuine	Adulterated or below Standard	Genuine	Adulterated or below Standard	Genuine	Adulterated or below Standard
Milk	163	7	53	7	216	14
Butter	44		1		45	_
Vinegar	_	1	5	1	6	2
Whisky	_	1	16	2	16	3
Coffee	_	_	9		9	
Cod Liver Oil	_		12		12	
Margarine	_		3		2	
Self Raising						
Flour			10		10	
Cheese	_		7		7	
Jam	_	_ ,	11	<u>-</u>	11	<u> </u>
Fruit Jelly	_ :		2	- 1	2	
Olive Oil			8	- /	8	
Extract of Malt						
and Cod Liver						
Oil			8		8	
Cream	_	_	7		7	_
Baking Powder	_		5		5	
Boracic Ointment	_		5	_	5	_
Camphorated Oil		_	10		10	_
Condensed Milk	_		14		14	
Sweets	_	-	1	_	1	_
Totals	207	9	187	10	394	19

Particulars of Formal Adulterated Samples and Action Taken.

Sample		Result.	Action Taken.
Milk		 26% deficient in fat	Dismissed on payment of £1 9s. 0d. costs.
Vinegar	•••	 Deficient in acetic acid	No action taken.
Milk		 Contained 2 parts per	Cautioned.
		million of formic aldehyde.	
Milk		 15.5% deficient in fat	Summons withdrawn.
Milk		 7.5% added water	Fined 20/- and 21/- costs.
Milk		 10.5% added water	Fined 20/- and 21/- costs.
Milk		 10% added water	Fined 20/- and 10/6d. costs.
		6% deficient in fat	
Milk		 12% deficient in fat	Fined 20/- and 21/- costs.
Whisky		 0.5% excess water	Cautioned.

Particulars of Informal Samples, Adulterated or Below Standard.

S	ample.		Result.
Vinegar		 	26% deficient in acetic acid.
Milk		 	10% deficient in fat.
Milk		 	11.3% deficient in fat.
Milk		 	3% deficient in fat.
Milk		 	11.3% deficient in fat.
Milk		 	6.5% deficient in fat.
Milk		 	20% deficient in fat.
Milk		 	16.5% deficient in fat.
Whisky		 	3.6% excess water.
Whisky		 •••	3.2% excess water.

Artificial Cream Act, 1929.

No action has been necessary under this Act.

Public Health (Dried Milk) Regulations, 1923 and 1927.

No conditions were observed that suggested the necessity of taking action under these Regulations.

Public Health (Condensed Milk) Regulations, 1923 and 1927.

14 samples of Condensed Milk were submitted to the Public Analyst, and were found to conform in all respects with the Regulations and the statements on the labels.

Public Health (Preservatives, etc., in Food) Regulations, 1925 to 1927.

The various food substances submitted to the Public Analyst under the Sale of Food and Drugs Act, were, when considered necessary or desirable, examined for preservatives, and prohibited colouring matters. One sample of milk was found to contain 2 parts per million of formic aldehyde.

Nutrition.

Dissemination of knowledge of food values, vitamins, etc., was the main objective in most of the health talks given throughout the year, both at the Infant Welfare Centres and to various organisations such as classes for young men and young women, guilds, sunday schools, etc.

Section 6.

Prevalence and Control over Infectious and other Diseases.

In the Appendix (Tables 4, 5, 6 and 7) will be found the numbers, age groups, ward distribution and seasonal prevalence of the Notifiable Infectious Diseases during 1934, together with the number reported yearly since 1916.

The following table shows the prevalence of the chief notifiable infectious diseases (apart from Tuberculosis) during the year, together with the case rate per 100,000 population, as compared with the decennial average 1924-1933.

		1934		1924-	—1933
	BUR	NLEY	England and Wales	BURNLEY	
Disease.	No. of Cases notified	Case Rate per 100,000 of population	Case Rate per 100,000 of population	Average No. of Cases notified	Case Rate per 100,000 of population
Smallpox Diphtheria and Membranous	_		4	22	22
Croup	347	362	170	121	122
Erysipelas	82	85	51	68	69
Scarlet Fever	354	369	376	253	254
Enteric Fever Primary and Influenzal	1	1	3	8	8
Pneumonia	149	155	127	221	222
Measies and German Measles	236	246	-	1,394	1,397

The number of deaths and the case mortality of the chief infectious Diseases are given in the following table.

	19	34	1924—1933		
Disease.	No. of Deaths	Mortality per 1,000 cases	Average No. of Deaths	Mortality per 1,000 cases	
Diphtheria	18 7 4 1	51·9 85·4 11·3 1000·0	9·8 2·6 1·4 0·8 14·0	81·0 38·2 5·5 100·0 10·0	

Smallpox.

There were no notifications received during 1934 and no vaccinations or re-vaccinations were performed by the Medical Officer of Health.

Vaccination.

The extent to which infant vaccination is accepted remains small, and during 1934 was slightly less than in the previous year. Of 1,197 infants whose births were registered during 1933, only 291 were successfully vaccinated by the end of January, 1935, equivalent to $24\cdot3\%$. The total number of children under 14 years who were vaccinated for the first time during the year 1934 was 364.

Scarlet Fever.

The epidemic of scarlet fever, which prevailed during the last five months of 1933, continued throughout the first quarter of 1934. 354 cases were notified, as compared with 760 in 1933. 240 or 66% were removed to hospital. Four deaths occurred.

The introduction of chickenpox into the scarlet fever ward of the hospital necessitated the isolation of the cases with double infection, and for several weeks the number of beds available for new cases was considerably reduced.

The morbidity and mortality from scarlet fever for the last ten years are as follows:—

1925	1926	1927	1928	1929	1930	1931	1932	1933	1934
									<
204	144	102	143	481	242	195	183	792	369
			1	8	1		_	3	4
_	-	_	·01	∙08	·01			.03	.04
	_		7.0	16.6	4.1	-		4.0	11.3
				204 144 102 143 101	204 144 102 143 481 1 8 01 ·08	204 144 102 143 481 242 — — 1 8 1 — — -01 ·08 ·01	204 144 102 143 481 242 195 — — 1 8 1 — — — ·01 ·08 ·01 —	204 144 102 143 481 242 195 183 — — — 01 08 01 — —	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$

Diphtheria and Immunization.

The year under review was characterised by an excessive prevalence of diphtheria in the borough. The number of cases notified was considerably higher than in any previous year since infectious diseases became compulsorily notifiable in 1884. The total cases during 1934 were 347, of which 85% were admitted to hospital for treatment.

The general incidence of diphtheria in the borough during the last 50 years has been considerably less than 200 cases per annum. In only two years, namely 1897 (207 cases) and 1921 (206 cases) did the total number exceed 200.

There was a considerable number of cases in the first quarter of the year, after which few cases occurred until October, when an epidemic originated in the west side of the town, which affected three schools.

Diphtheria is essentially a disease which should be nursed in hospital. It is highly infectious, and there has been ample evidence that many cases in the epidemic in the last few months were infected through the medium of otherwise healthy carriers of the infection. Included in the number of cases isolated in hospital are several carriers of the infection who did not present any evidence of illness, and a few with infective rhinorrhæa or otorrhæa but without any diphtheritic membrane on the mucus membrane of the throat or air passages.

Hospital isolation of diphtheria has been encouraged, even in instances where home conditions are good and home isolation is adequate, as correct nursing is of the first importance in preventing or combating the dangerous complications and sequelæ which so frequently occur.

The type of diphtheria prevalent during 1934, and in the two preceding years, has been severe. Despite intensive treatment and the administration of large amounts of antitoxin immediately on admission, there has been a high incidence of serious complications, particularly heart affections, and the number of deaths is high. Several cases presenting extensive membrane, much enlargement of the neck glands and intense toxæmia, succumbed within a few days after admission to hospital.

Return and Secondary Cases from Burnley County Borough:-

		Scarlet Fever.	Diphtheria.
Return Cases	 	 13	 6
Secondary Cases	 	 8	 10

The morbidity and mortality from diphtheria for the last ten years are as follows:—

	1925	1926	1927	1928	1929	1930	1931	1932	1933	1934
Cases per 100,000 of						,				
Population	159	143	155	94	137	90	86	88	166	362
Number of Deaths	15	9	8	8	7	7	3	10	13	18
Mortality Rate per										
1,000 of Population	.15	-09	.08	-07	-07	.07	.03	.10	·13	.19
Mortality Rate per										
1,000 cases	92.0	60.6	52.0	84.2	51.1	77.7	34.9	116.3	81.8	51.9

Bacteriological Diagnosis.

There were 3,218 swabs for diphtheria examined at the Corporation Public Health Laboratory, and 428 of these were positive. 1,074 of the swabs were sent by private practitioners in respect of Burnley residents.

Supply of Diphtheria Anti-Toxin.

In accordance with the recommendations of the Ministry of Health, phials containing 500 units for prophylactic purposes, and phials containing 8,000 units for treatment, are available.

Two hundred and forty phials of 8,000 units and 15 phials of 500 units have been supplied to medical men. The Anti-toxin is available for any person residing in the borough on a written order from any medical man. It can be obtained at the Public Health Office during the day and at the Central Police Station, Town Hall, between the hours of 11 p.m. and 9 a.m.

The Immunization Clinic.

This is held weekly in the School Clinic premises. The numbers dealt with during the year were as follows:—

		Children of			Children of
		Pre-school age.			School age.
Shick Tested	•••	•••	_		23
Re-attendances for Interpretation	of the				
Shick Test			_		55
Number Immunized		•••	110	•••	424
Attendances for Immunization		•••	340	•••	1,282

Other Infectious Diseases.

Only one case of Enteric Fever was notified. It was diagnosed after admission to a General Hospital and died there.

Eighty-two cases of ERYSIPELAS were notified—an increase of 22 over the number for the previous year. Only 6 cases were admitted to the Infectious Diseases Hospital, but a considerable number were treated in the Municipal General Hospital. Seven cases died.

Measles and German Measles which are notifiable in the borough, accounted for 236 notifications—225 being measles and 11 german measles. Only 6 cases occurred in persons aged 10 years and over. The majority of the cases were mild; only one case was admitted to hospital for treatment, and no deaths from measles occurred.

One hundred and thirty-nine notifications were in respect of PRIMARY PNEUMONIA, which is 69 less than in the previous year. INFLUENZAL PNEUMONIA was also less prevalent, only 10 cases being notified as against 48 in the previous year. Fifty-two deaths occurred from all forms of pneumonia.

In view of the importance of giving mixed types 1 and 2 Anti-Pneumoccus Serum early in cases of pneumonia, a small stock is kept in the Public Health Office for issue at cost price to medical practitioners requiring it in an emergency for the treatment of pneumonia.

Three cases of Bacillary Dysentery (Flexner) were diagnosed after admission to the Municipal General Hospital.

Six cases of Cerebro-Spinal Fever were notified. Three were removed to hospital, after notification, for treatment and 2 were diagnosed after admission to hospital.

There were 5 cases of Encephalitis Lethargica, 2 of Acute Polio-Myelitis, and one of Polio-Encephalitis.

Particulars of 6 notifications of Ophthalmia Neonatorum, 7 of Puerperal Fever, and 16 of Puerperal Pyrexia are given elsewhere in this report.

No cases of Malaria were notified during 1934.

The following Non-notifiable Infectious Diseases were reported by Head Teachers of Schools, Parents, and School Attendance Officers, or discovered by the Health Visitors and School Nurses in the course of their routine visits to homes:—

Chickenpo	X	 	 	 91
Whooping	Cough	 	 	 44
Mumps		 	 	 264

Arrangements were made with the District Nursing Association for the home-nursing of 3 cases of infectious disease. The nurses made 49 visits.

Infectious Diseases Hospital. (BURNLEY JOINT HOSPITAL BOARD).

The total patients admitted to the hospital in 1934 was 768, being the second highest annual number of admissions in the history of the hospital. One hundred and nine patients were under treatment at the commencement of the year, and these together with 768 patients admitted, made 877 cases under treatment during 1934. This is 70 less than in 1933. Of the total admissions, 47% were cases of scarlet fever and 43% cases of diphtheria. Seven cases were suffering from double infections with scarlet fever and diphtheria.

Uncomplicated cases of scarlet fever continue to be discharged from hospital at the end of the fourth week of disease. Where children suffering from scarlet fever can be properly isolated and nursed in their own homes, removal to hospital is not insisted upon. In many instances, however, although home isolation may be satisfactory, patients are admitted to hospital on the request of the parents, as many mothers who work in the cotton mills do not wish to remain off work.

A separate report is issued of the work of the Infectious Diseases Hospital and Smallpox Hospital for the year 1934.

Cases from the County Borough of Burnley treated in the Sanatorium for Infectious Diseases. (Classified according to Final Diagnosis).

Disease.	Remaining in Hospital at the end of 1933	Admis- sions	Discharges	Deaths	Remaining in Hospital at the end of 1934	Average Stay in Hospital of patients discharged Days.
Scarlet Fever	57	234	274	2	15	29
Diphtheria	29	297	253	16	57	
Scarlet Fever+ Diphtheria	_	6	5	1	_	} 41
Erysipelas	_	6	6	-	_)
Whooping Cough	_	1	1	_	_	
Mumps	_	1	1	- 1	_	
Measles	_	1	1	_	_	
Chickenpox	_	1	1	_	_	90
Cerebro-Spinal Meningitis	-	2	1	1,	_	30
Puerperal Pyrexia and Fever	_	4	2	2	_	
Tonsillitis	_	8	8	_	_	
Other Diseases	_	6	6	_		
Total	86	567	559	22	72	_

Other Diseases.

INFLUENZA. There was comparatively little influenza in the borough during 1934, and what did occur was of a mild nature. Only 10 cases of influenzal pneumonia were notified. The deaths from influenza numbered 10, as against 59 in the previous year. Three occurred in persons between 25 and 45 years of age and 7 in persons over 65.

No cases of Anthrax, Epidemic Jaundice, Undulant Fever or Psittacosis were brought to the notice of the Health Department during 1934.

Cancer. Statistics of deaths from cancer are given on page 23. Beds for in-patient treatment of cancer are available in both the Victoria (Voluntary) Hospital and the Municipal General Hospital. Although no beds are specifically set aside in the latter hospital for this purpose, 99 of the patients who were discharged or died during the year were suffering from malignant disease.

In Victoria Hospital there is a Radium Department, with 330 mgms of radium, which although not a National Radium Centre, is recognised by the National Radium Commission. It has therefore not been considered necessary to make arrangements for the treatment of cancer cases from Burnley at a National Radium Centre.

The records kept by the Registrar of the Cancer Clinic are on the lines suggested by the Commission on cancer. It has, therefore, been considered inadvisable to duplicate enquiries by undertaking investigations on the lines suggested in Circular 1,136.

A Deep X-Ray therapy apparatus is installed in Victoria Hospital, which is available for the treatment of patients from both the Victoria and Municipal Hospitals.

During the past year, 12 beds specifically for the treatment of cancer were provided in Victoria Hospital. These are in a male ward of 3 beds, a female ward of 6 beds and 2 private wards of 2 beds and 1 bed respectively.

Prevention of Blindness. No action was taken under Section 66 of the Public Health Act, 1925, for the prevention of blindness or for the treatment of persons suffering from any disease or injury to the eyes.

The Blind Persons' Acts are administered by the Special Services Sub-Committee of the Education Committee, on which are co-opted representatives of the Burnley Blind Society and the League of the Blind. The Register of the Blind contains the following:—

Number of new cases during 1934		32
Deaths during 1934		14
Removals from register during 1934		2
Number on register on 31st December, 1934		249
Number in receipt of grants from the Local Autho	rity	
on 31st December, 1934		98

DISINFECTION.

The rooms of houses in which infectious diseases have occurred are disinfected by means of the formaldehyde spray. Clothing, bedding, etc., are, where necessary, removed to the Disinfecting and Cleansing Station for steam disinfection. During the epidemic of scarlet fever, economy was effected by disinfecting bedding, etc., in the houses in many instances.

The statistics of domiciliary investigation of infectious disease and disinfection are as follows:--

Visits to Infected Houses	1,279
Visits to suspected cases of Infectious Diseases	3 5
Visits to cases of Measles	236
Houses Disinfected (1,128 rooms)	887
Number of times Steam Disinfector used	775
Hospitals Wards Disinfected	84
School Premises Disinfected	11
Clinic Premises Disinfected	6
Beds Disinfected	869
Pillows, Blankets, Sheets, etc., Disinfected	5,782
Clothing Disinfected	1,802
Library Books Disinfected	926
Maternity Hospital Beds, Pillows, Blankets, etc.,	
Disinfected	816
Open-Air School, Blankets Disinfected	284
Verminous Persons Cleansed (16 persons) Sulphur Bath Treatment of Scabies (45 persons)	291 Baths

PUBLIC HEALTH LABORATORY.

The following is a report by Dr. Priestley, the Municipal Bacteriologist, on the work of the Laboratory during 1934.

I. General Statistics.

Sputa for tubercle bac	cilli	 positive	89	
•		negative	479	568
Swabs for diphtheria	bacilli	 positive	428	
		negative	2,790	3,218
Hairs for ringworm		 positive	0	
		negative	3	3
Tissues for section		 		144
Pus and exudates	•••	 		176
Cerebro-spinal fluids		 		70
Urines		 		221

TC.					0.0
Fæces	•••	•••	• • • •	•••	36
Widal tests	•••	•••			21
Blood counts, cultures, an	d typing	tests			140
Waters					53
Milks for bacterial count					226
Milks for T.B. by animal i	inoculati	on			190
Other tests by animal inoc	culation	•••			18
Vaccines made					23
Various specimens unclass	ified (ma	inly fo	od-sti	uffs)	17
					5,124
V.D. Examinations:—					
for spirochætes				14	
for gonococci				691	
Wassermann tests				1,148	
Precipitation tests	•••			928	2,781
•					
	Total				7,905

II. Source of the Specimens.

(a) GENERAL:

	Burnley P.H.D. & Clinics	Municipal Hospitals	Victoria Hospital	Practi- tioners	Padiham U.D.C.	Brierfield U.D.C.	Burnley R.D.C.	Colne Borough	Rish U.I
Sputa for T.B	96	59	36	340	14	_	10	13	-
Swabs for K.L.B.	868	673	416	1074	63	13	28	67	1
Hairs for tinea	1	1	1	_	H —	_		_	-
Tissues	_ /	30	102	11		_	1	_	-
Pus, etc	5	54	86	28	1	I — I	_	2	
C.S. fluids	2	23	44	_	_	l —		1	_
Urines	78	82	36	23	1			1	-
Fæces	<u> </u>	23	2	4	1	_	3	3	-
Widals	_	1	2	8	2	1	3	4	-
Bloods	1	18	97	24			_		-
Waters	29		_)	_	_	_	22*		
Milk counts	204				20		2		-
Milks for T.B	189) —		_			1		
Other animal tests	_	18				_			
Vaccines	5	_	9	9		_		<u></u>	
Foodstuffs	17	<u> </u>		_	_		_		-
Total	1495	982	831	1521	102	14	70	91	1

^{*} Includes two waters examined for a Colliery Company.

(b) V.D. Specimens:

	For		or coccus	. Wood	Dunninitation
	Spirochætes	micro.	culture	Wass. tests	Precipitat'n tests
Burnley:					i
Treatment Clinic .	6	216	31	115	115
Practitioners	—	126	16	516	501
Lancashire C.C.:					1
Treatment Clinic .	7	206	42	60	60
Practitioners	1	27	3	209	205
West Riding C.C.:					
Treatment Clinic .	—	20	1	12	12
Practitioners	—	2	1	36	35
Ministry of Health .	—	_	-	200	_
Total ·.	14	597	94	1148	928

III. Comparison of the last six years.

	1929	1930	1931	1932	1933	1934
General specimens V.D. specimens		2,888 976	3,031 1,237	3,450 2,680	3,826 2,336	5,124 2,781
Total	4,038	3,864	4,268	6,130	6,162	7,905

The general specimens show an increase of 28% and the venereal disease specimens an increase of 19% on last year. The increase in the former is largely due to the prevalence of diphtheria during the later part of the year, the swab examinations having increased from 1,702 in 1933 to 3,218 in 1934. This has entailed a very large amount of work, for the mere examination of cultures from the swabs sent by no means completes the work. It is to be regretted that the pressure of work here has not allowed of research into the recently distinguished gravis and mitis types of B. diphtheriæ, for which the recent outbreak gave opportunity. I am, however, in conjunction with the Resident Medical Officer of the Isolation Hospital, investigating the possibility of distinguishing the types by morphological appearance in stained smears. So far this does not seem very promising, but the investigation will be pursued.

The examinations in connection with venereal disease have been somewhat increased by the inclusion of a series of 200 Wassermann tests, done in parallel with the laboratory of the Ministry of Health.

IV. Samples of Milk Examined for Tubercle Bacilli.

During the year 190 animals have been inoculated with milk sediments for evidence of the presence of tubercle bacilli; 189 for the Burnley Corporation and 1 for the Burnley Rural District Council. Of these 8 showed tuberculous infection, a percentage of 4.2.

The percentage of tuberculous milks found in this laboratory in the last six years is shown in the following table:—

	1929	1930	1931	1932	1933	1934
No. of milks examined Positive for T.B		18 4 9	196 11	187 12	190 9	190 8
Percentage positive	2.5	4.9	5.6	6.4	4.7	4.2

V. Bacteriological Examination of Samples of Milk, 1934.

The examination of samples of milk for bacterial count and evidence of fæcal pollution has been continued, but owing to the pressure of other work the number of such examinations had to be reduced in 1934, a comparison of the average bacterial content of ordinary vended milk samples examined during 1934 with those of previous years is as follows:—

Table I. Average Counts.

		Morr	NING MILKS	Evening Milks			
•	Year	Number examined	Average per cc. in thousands	Number examined	Average per cc. in thousands		
	1926	128	118:3	63	110.3		
	1927	249	34.9	123	98.7		
	1928	253	3 6·9	146	108.7		
	1929	235	67.2	125	172.4		
	1930	260	30.3	120	118.2		
	1931	274	33.1	125	48.5		
	1932	292	$52 \cdot 7$	108	105.8		
	1933	226	15.4	98	18.1		
	1934	156	39.7	44	21.6		

Table II. Percentage showing Pollution by Lactose Fermenting Organisms.

Year		Not in 0·1 cc.	In 0·1, not 0·01 cc.	In 0.01 cc.
1926	 	43.7	23.3	33.0
1927	 	53.4	25.6	21.0
1928	 	59.9	24.3	15.8
1929	 	58.9	20.4	20.6
1930	 	57.6	22.1	20.2
1931	 	$60 \cdot 2$	19.7	20.0
1932	 	61.0	21.0	18.0
1933	 	68.5	20.4	11.1
1934	 	57.0	23.0	20.0

Table III. Percentage in each Standard Group.

Our Standard Groups are as follows:-

Group I. not over 10,000 per cc. . . . Group II. 10,000 to 30,000 per cc. ... Group III. 30,000 to 50,000 per cc. 50,000 to 100,000 per cc. Group IV. Group V. 100,000 to 200,000 per cc. Group VI. 200,000 to 500,000 per cc. Group VII. over 500,000 per cc.

	No. of	I	Percentage of Samples in each Standard Group							
Year	milks examined	Group I.	Group II.	Group III.	Group IV.	Group V.	Group VI.	Group VII.		
1926	197	8.6	26.4	15.7	22.3	13.2	8.6	5.0		
1927	389	31.6	31.8	11.5	10.8	6.9	2.3	4.8		
1928	402	37.5	37.8	9.7	7.0	2.7	$2\cdot 2$	3.0		
1929	360	39.1	30.7	9.5	8.1	2.4	3.0	7.0		
1930	380	38.1	32.9	12.4	7.9	3.7	3.9	1.0		
1931	400	46.5	33.2	7.2	6.0	4.5	1.0	1.5		
1932	400	49.7	28.2	8.5	7.0	2.0	2.0	2.5		
1933	324	68.7	18.2	5.1	5.1	1.5	1.1	0.2		
1934	200	42.5	34.5	12.5	6.0	2.5	1.0	1.0		
								1		

In the report for 1930 a series of averages was drawn up, based on the previous four years figures, of what might be expected as minimum standards for ordinary vended milks. The following table shows a comparison between these standards and the figures for 1934.

Table IV.

			Standard.	1934.
1.	Average count of morning milks	 	41,800	 39,700
2.	Average count of evening milks	 •••	124,000	 21,600
3.	Percentage with count of under			
	10,000 per cc	 	36.5	 42.5
4.	Percentage with count of under			
	30,000 per cc	 	69.9	 77.0
5.	Percentage with count of over			
	200,000 per cc	 	6.8	 2.0

Although the average bacteriological standard of the milk samples was not so high as in the previous year, it nevertheless continues to be good. Of the 200 milk samples examined in 1934, 154 reached the standard of bacterial count of certified milk and a further 42 samples reached Grade A milk standard.

Section 7.

Tuberculosis.

The number of primary notifications under the Public Health Tuberculosis Regulations received each year since all forms of Tuberculosis became notifiable is shown below.

No. of Primary Notifications.

			Non-	
Year.	Pulmonary.		Pulmonary.	Total.
1913	 194		107	 301
1914	 149		62	 211
1915	 149		74	 223
1916	 135		100	 235
1917	 145		74	 219
1918	 124		56	 180
1919	 126		59	 185
1920	 110		56	 166
1921	 122		63	 185
1922	 155		78	 233
1923	 172		85	 257
1924	 143		92	 235
1925	 126		85	 211
1926	 120		68	 188
1927	 100		72	 172
1928	 131		60	 191
1929	 100		52	 152
1930	 112		55	 167
1931	 92		46	 138
1932	 115		57	 172
1933	 86	•••	53	 139
1934	 74		41	 115

Notification Register.

At the end of 1934 there remained on the Tuberculosis Notification Register in Burnley 401 cases as follows:—

Pulmonary.			N	Total			
Males.	Females.	Total.		Males.	Females.	Total.	Cases.
139	113	252		57	92	149	401

The particulars of new cases of tuberculosis coming to the knowledge of the Department and the deaths from tuberculosis in 1934 are as follows:—

A ma			New 6	Cases					DEA	тнѕ		
Age Periods	P	ulmona	ary	Non	-Pulmo	nary	P	ulmona	ıry	Non	-Pulmo	nary
	M.	F.	Total	M.	F.	Total	M.	F.	Total	M.	F.	Total
Under 1		_		1	1	2	_	<u> </u>		1	1	2
15	_	1	1	_	4	4	_	_	_ (-	2	2
5—10	1	1	2	2	7	9	_	_	_	_	1	1
1015	1	3	4	1	-	1				1	_	1
15-20	3	4	7	6	2	8		3	3	3	1	4
20-25	3	3	6	2	1	3	2	5	7	1	2	3
25-35	9	8	17	7	7	14	4	8	12	2	_	2
35—45	11	10	21	1	2	3	6	7	13		_	
45 - 55	10	6	16	2	1	3	8	3	11			_
5565	5	1	6			_	5	_	5	2		2
65 and												
upwards	4	2	6	1	_	1	2	1	3	1	-	1
Total	47	39	86	23	25	48	27	27	54	11	7	18
)

Notifications.

115 formal notifications under the Public Health (Tuberculosis) Regulations, 1930, were received during the year. In addition 8 cases were discovered after death, through the local Registrar's death returns, and 11 cases were transferred into the borough from other areas. No duplicate notifications were received. The total number of new cases was, therefore, 134, of which 86 were pulmonary and 48 non-pulmonary.

Non-notification and Late Notification.

The doctors notifying the deaths were communicated with in regard to the 8 non-notified cases ascertained through the death returns, and satisfactory explanations of failure to notify were obtained.

The rate of non-notified tuberculosis deaths to total tuberculosis deaths is $11\cdot1\%$, compared with $9\cdot5\%$ in 1933. The particulars are:—

Non	n-notified Fatal Ca	- Total	Percentage of Non-notified	
Pulmonary	Non- Pulmonary	Total	Fatal Cases	Cases
2	6	8	72	11.1

The following figures, showing the interval between notification and death of pulmonary cases of tuberculosis, are an indication of the efficiency of notification.

	Insured N.H.I.	Non- Insured	ι.	Total.
Under on week	5	 2		7
Between one week and one				
month	3	 		3
" 1—2 months	4	 1		5
,, 2—3 months	_	 1		1
,, 3—4 months	2	 		2
,, 4—5 months	2	 1		3
,, 5—6 months	2	 1		3
,, 6—9 months	1	 2		3
,, 9—12 months	1	 _		1
,, 1—2 years	6	 1		7
,, 2—3 years	2	 1		3
Over 3 years	13	 1		14
Not notified	1	 1		2
				—
		Total		54
				_

Of the persons who died of pulmonary tuberculosis during 1934, 52% were notified only within a year previous to date of death. The number of such cases is less than in the previous year. An increasing number of patients suspected to be suffering from tuberculosis are being referred to the Tuberculosis Officer by medical practitioners. The majority of the new cases in 1934, were examined by the Tuberculosis Officer before being notified.

Occupations of 115 persons notified under the Tuberculosis Regulations:—

	Pulmonary.	Non-Pu	ulmonary.
Textile Operatives and Allied Trades	. 33		12
Miners	. 3	•••	_
Engineers, Mechanics and Transport			
Workers	. 1	• • •	3
Shopkeepers, Assistants, etc	. 1		3
Professional Men	. 1		_
Clerks, Typists, etc.	. 1		1
Housework, Cleaners, Laundresses,			
Waitresses	. 13		2

						Pι	ılmonary	. Non-P	ulmonary.
Paint	ers						1 .		
							1 .		1
							4 .		1
							7 .		
							3 .		2
							4 .		10
Unde	r Scho	ol Age			• • • • • • • • • •		1 .		6
							74 .		41
SEX AND S	TATE O	F PATI	ENTS.		Jan Tanana				
							37 4161	1.6	
	2.5					,	Notifie		Tr (1
	Mar	ried	Sii	ıgle	Chil	dren	Institu	itions	Total
	М.	F.	М.	F.	M.	F.	М.	F.	
Pulmonary	18	20	11	7	2	3	8	5	74
Non-									
Pulmonary	6	3	3	5	3	8	5	8	41
					<u> </u>		<u> </u>		Non-
Number of	Room	is in F	Houses	•			Pulmon	ary. Pi	ulmonary.
1 Roor	n								1
2 Room									1
3 ,,							4		1
4 ,,									10
Over 4								•••	15
Institu									13
							_		_
			•	Γotal .			74		41
									— Non-
Condition	of Pa	TIENT.							— Non- almonary.
Condition Bedfast							Pulmon		
Bedfast	t						Pulmon 23	ary. Pi	ulmonary.
Bedfast	t me, no	t Bedf	ast				Pulmon 23 32	ary. Pi	ulmonary.
Bedfas At Ho Workir	t me, no ng	t Bedf	ast				Pulmon 23 32 6	ary. Pi 	ulmonary. 6 14
Bedfasi At Ho Workir Attend	t me, no ng ing Scl	t Bedfa	ast				Pulmon 23 32 6	ary. Pi 	almonary. 6 14 4
Bedfasi At Ho Workir Attend	t me, no ng ing Scl	t Bedfa	ast				Pulmon 23 32 6	ary. Pi 	almonary. 6 14 4 4
Bedfasi At Ho Workir Attend	t me, no ng ing Scl	t Bedfa	ast				Pulmon 23 32 6 — 13	ary. Pi 	almonary. 6 14 4 4

SLEEPING ACCOMMODATION.

Room to self
Bed, but not room to self
Sleeps with other person
Bed in living-room
Institutions
Total

The 23 pulmonary cases who did not sleep alone are divided as follows, the first-named being the one suffering from the disease.

Husband with Wife	8
Wife with Husband	12
Adult with Adult	2
Child with Child	1
Total	23

Duration of Illness.	Pulmonary.	Non- Pulmonary.
Under 1 month		2
1—3 months		9
3—6 ,,	10	3
6—9 ,,	11	5
9—12		1
1—2 years	<u> </u>	1
Over 2 years	4 .	7
Institutions	13 .	13
Total	74 .	41

It will be seen from the above that the average duration of the illness, which will be certainly understated, of the 61 pulmonary cases not in institutions, is 5 months.

The duration of the illness of the 23 pulmonary cases who did not sleep alone averaged at least 3.0 months. Thus there had been 23 persons exposed daily for a considerable period in the closest possible manner.

As regards isolation of the 74 persons suffering from Pulmonary Tuberculosis the possibilities of isolation were as follows:—

Good	25
Fair	19
Bad	17
Institutions	13
	_
Total	74

Goods, means that it was easily possible to have room to self. Fair, means that the patient could have a bed to self, but would have to share the room with one other person. Bad, means that, though the patient might have a bed to self, the room had to be shared with two or more persons.

Deaths.

72 deaths from Tuberculosis were recorded in 1934, of which 54 were Pulmonary and 18 Non-Pulmonary.

The following table gives particulars of the site and age distribution.

	-1	1—2	2—5	5—15	15—25	25—45	45—65	6575	Over 75	Total
Respiratory System	_	_	_		10	25	16	3	_	54
Nervous System	2	1	1	1	3	_		_	_	8
Intestines and Peritoneum	_	_	_ (2	1		_	_	3
Vertebral Column			_	_	2	1	1	_	_	4
Other Bones and										
Joints	_	_ 1			—	_	1		_	1
Skin			_			1	_	_		1
Lymphatic System		_	_	1	_	_	_	· ;	_	1
Total	2	1	1	2	17	28	18	3	_	72

23 deaths from Tuberculosis of the Respiratory System were new cases notified during the year.

The average age at death of the pulmonary cases was 39.2 years.

The 72 deaths from all forms of Tuberculosis gave a death rate of 0.76 per 1,000 living, compared with 0.89 in 1933.

The following table gives the death rate for the last 10 years in respect of pulmonary and other forms of Tuberculosis.

No of Deaths from Pulmonary	1925	1926	1927	1928	1929	1930	1931	1932	1933	1934
Tuberculosis	83	69	·73	83	75	70	75	69	66	54
Rate per 1,000 of the Population	0.81	0.69	0.72	0.83	0.74	0.70	0.75	0.71	0.69	0.57
		1	1							1
	1925	1926	1927	1928	1929	1930	1931	1932	1933	1934
No of Deaths from other forms of Tuberculosis	1925	1926	1927	1928	1929	1930	1931 16	1932	1933	1934

Public Health (Prevention of Tuberculosis) Regulations, 1925.

These regulations empower Local Authorities to prohibit persons suffering from tuberculosis of the respiratory tract from entering any employment or occupation in connection with the handling of milk. During the year it was not necessary to take any action under these regulations.

Public Health Act, 1925, Section 62.

It has not been necessary for the Council to take any action during 1934 for the compulsory removal of any tuberculosis case to hospital.

THE TUBERCULOSIS SCHEME.

The Scheme has been described in previous reports. No alteration has been made in the personnel, premises, days and hours on which the Dispensary is open, or in the sanatoria and hospital bed accommodation utilised. During 1934, an average of 58 beds were occupied.

New Cases.—The number of new cases and contacts seen at the Dispensary during the year was 311. 140 were examined as contacts. The corresponding figures for last year are 288 new cases (including 134 contacts).

Of the 311 new cases, 111 or 35.7% were children under 15 years of age. The sex distribution of the new cases is given below.

				Male.	Female	е.	Total.	T	otal 1933
Adult				95	 105		200		187
Children (under	15)	•••	47	 64		111		101
				142	 169	•••	311		288

DIAGNOSIS.—211 of the new cases were found not to be tuberculous (67.8%). 92 were diagnosed as tuberculous (65 pulmonary and 27 non-pulmonary), and the remaining 8 cases were still under observation by the Tuberculosis Officer at the end of the year.

Particulars of the condition at the end of 1934 of the 92 new cases of Tuberculosis examined during the year are as follows:—

			Pulme	ONARY.			Non	-Pulmo	ONARY.	
	т.в.—	1	T.B.+	3	Total	Bones and Joints	Abdominal	Other Organs	Peripheral Glands	Total
Disease Arrested						2	2	1	4	9
Disease not Arrested	16	13	17	6	52	4		3	11	18
Lost sight of or										
removed from register	1	-		1	2	******				
Dead	3	2	1	5	11				-	
Total	20	15	18	12	65	6	2	4	15	27

Cases on the Dispensary Register.—At the beginning of the year 522 cases were on the register. At the end of the year there were 379 (242 Pulmonary and 129 Non-Pulmonary) and 8 cases in which the diagnosis was not completed. During the year, 11 "lost sight of" cases returned, 354 cases were written off the register, 131 as recovered, and in 223 cases the diagnosis was not confirmed or non-tuberculous. 44 cases died during the year and 67 were transferred to other areas or "lost sight of" or not desiring further assistance.

Work done at or in connection with the Dispensary:—

Number of times open	Day Evening	297 49	346
Number of patients who atter	nded		740
Number of attendances by pa	itients		2,255
Details of Work:—			
Number of Examinations	s by the		
Tuberculosis Officer	•••		1,491
Number of Dressings, et	ic		57
Number of X-Ray Exam	ninations	•••	200

Visits paid by Nurse to Homes:—

The following is a copy of a return on the work of the Dispensary required by the Ministry of Health:—

Return showing the work of the Dispensary during the year 1934.

	I	PULM	ONAR	Y	Noi	v-Pu	LMON	ARY	1	To	TAL		1	
Diagnosis	Ad	ults	Chil	dren	Adı	nlts	Chil	ldren	Adı	ults	Chil	dren	Grand	
	М.	F.	M.	F.	М.	F.	M.	F.	М.	F.	М.	F.	Total	
A.—New Cases examined during the year (excluding contacts):— (a) Definitely tuberculous (b) Diagnosis not completed (c) Non-tuberculous	35 	22	1	3	8 —	9 —	3 _	8 —	43 2 31	31 3 28	4 1 5	11 2 10	89 8 74) 17:
B.—Contacts examined during the year:— (a) Definitely tuberculous (b) Diagnosis not completed (c) Non-tuberculous	1 —	1 — —			=	_	_	1 _	1 - 18	1 42	_ 37	1	3 137	140
C.—Cases written off the Dispensary Register as:— (a) Recovered (b) Non-tuberculous (including any such cases previously diagnosed and entered on the Dispensary Register as tuberculous)	35	28	2	1	12	14	23	16	47 51	42 78	25	17 50	131 Y	35
D.—Number of Cases on Dispensary Register on December 31st:— (a) Definitely tuberculous (b) Diagnosis not completed	134	96	4	8	24	51	25	29	158	147	29	37	371	37
1. Number of cases on Dispensa	 er	52			Offic	cer to	o hor	sits nes (i	nclud	ding I	ersoi	nal 	90	_
charge under Head 3 in previous years. Number of cases transferred to oth		- 1	1					omes 	for 	Dis	pensa	ry	3306	
areas, cases not desiring furth assistance under the scheme, ar cases "lost sight of" 4. Cases written off during the year Dead (all causes)	7	purposes						97 200						
Dispensary (including Contacts) 6. Number of Insured Persons und Domiciliary Treatment on the 31	er	225	5 1	1. 1	resto	ored	to	Reco Dispo n A(a	ensar	y R	egist	er,		
7. Number of consultations with medic practitioners:- (a) Personal		21 16	0*	2. N		ensa	ry R	r.B. tegist					161	

(B) Number of Dispensaries for treatment of Tuberculosis (excluding centres used only for special forms of treatment).

Provided by the Council 1 Provided by Voluntary Bodies

^{*} In addition there were 55 consultations with the Orthopædic Surgeon.

Initial Reports received from	Medica	l Pract	itioner	s on Fo	orm G.1	P. 17	
in respect of insured pati	ents						46
Progress Reports received from	om Med	dical P	ractitic	ners ir	respe	ct of	
insured patients							151
Extra nourishment supplied	to nece	essitous	patier	its (cas	ses rece	eived	
Milk and Eggs)							22
Cartons of Cod Liver Oil and	Malt is	sued				•••	289 lbs.
Sputum Cups issued							174
Paper Handkerchiefs issued							17,550
Tins of Disinfectant		•••		•••		•••	1,491
Air rings hed page etc	are len	t to ne	cessito	is natio	ents		

Home Nursing.

There is no provision under the Tuberculosis Scheme for supplying Nurses for patients in their own homes. In practice, the services of the staff of the Nursing Association are available. During 1934, 8 cases were referred to the Association and 426 visits were made.

Dental Treatment for Tuberculous Persons.

No alteration in the arrangements for dental treatment has been made. During the year 44 sessions were held by the dentist. The following are particulars of the work done:—

Number of ca	ses ur	ider tr	eatmen	t	 65
Number of at	tendaı	nces			 183
Dentures supp	olied				 16
Fillings					 26
Extractions					 167
Scalings					 13
Dressings					 11
Other Operati	ons				 1

A number of Burnley patients received dental treatment whilst undergoing treatment in Sanatoria.

TREATMENT IN INSTITUTIONS.

57 Burnley patients were in various Hospitals and Sanatoria for the treatment of Tuberculosis at the end of 1933. 103 other cases were admitted during the year, 102 cases were discharged, and 8 died, leaving 50 still in Institutions at the end of 1934.

In the following table are given details in respect of the various Institutions at which Burnley cases received treatment during the year.

Average duration of stay of those discharged (weeks)	18.3	31.2	10.8*	25.0	47.4	16.0	24.1	141-4	9-5	:	38.7	
s in ns 34. Total	5	25	:	+	¢1	-	+	:	7	က	īĠ	50
ining tutior I/12/3 C.	:	- ?1	:	-	:	:	:	:	-	ೞ	;	7
Remaining in Institutions on 31/12/34.	63	x	:	c)	:	:	:	:	:	:	¢.1	1.4
K Y	က	15	:	-	ঝ	1	4	:	:	:	က	29
Total	:	:	က	1	:	÷	ಣ	:	:	:	-	8
Died C.	:	:	:	:	:	:	:	:	:	:	:	:
H.	:	:	က	-	÷	:	:	÷	i	:	. –	5
M.	:	:	:	:	:	÷	ಣ	:	:	:	:	3
ed. Total	+	41	15	14	1	63	14	67	วเ	:	7	102
Discharged. F. C. To	:	:	-	:	:	:	:	61	ଚୀ	:	-	9
Disch F.	က	15	14		:	:	:	÷	÷	:	9	44
M.	-	56	:	, x	-	61	14	:	:	:	:	52
d. Total	7	7	18	∞	-	63	16	:	रुग	:	20	103
Admitted. F. C. I	:	61	7	-	:	:	:	:	ତୀ	:		7
Adn F.	ಣ	13	17	ಸ್ತ	:	:	:	:	:	÷	+	2
Ä	4	26	:	63	7	ଚୀ	16	:	:	:	က	54
in ns 33. Total	63	25	:	11	67	-	io.	63	-	က	iΩ	57
Remaining in Institutions on 31/12/33. F. C. To	:	:	:	:	:	:	:	¢.1	_	က	:	9
kema Instit on 31 F.	6.1	10	:	+	:	:	:	÷	:	:	10	21
M.	:	15	:	7	रा	7	10	:	:	:	:	30
INSTITUTIONS.	Blencathra Sanatorium	Meathop Sanatorium	Marsden Road Hospital, Burnley	Robert Jones and Agnes Hunt Ortho- padic Hospital	Preston Hall	East Lancashire Tuberculosis Colony	Withnell Pulmonary Hospital	Heatherwood Hospital	Ethel Hedley Hospital	Liverpool Open Air Hos	Aysgarth Sanatorium	TOTALS

* The Tuberculosis Ward of Marsden Road Hospital was evacuated of tuberculous cases on 19/11/34, as additional accommodation was required for cases of Diphtheria.

AGES OF CASES ADMITTED.

	Under 15	15—20	2030	30—40	4050	50—60	Over 60	Total
Males Females	3 4	3 3	16 20	19 12	10	5	1	57 46
Total	7	6	36	31	15	6 .	2	103

CLASSIFICATION OF CASES ADMITTED.

			Pu	LMONAR	Υ			Non-F	ULMON	ARY			
	т.в.—	1	2	T.B.+	Total	Gross Total	Bones and Joints	Abdominal	Other Organs	Peripheral Glands	Total		Grand Total
Males Females Children	 15 6 2	5 11 2	18 8 —	11 9 —	34 28 2	49 34 4	2 5 3		- 3 -	_ _ _	4 8 3	1 _ _	54 42 7
Total	 23	18	26	20	64	87	10	2	3	-	15	1	103

CLASSIFICATION OF PATIENTS who were discharged or died.

Classification	M.	Quiescer F.	nt Ch.	No M.	t Quies F.	cent Ch.		Died in stitutio F.		Observa- tion	Total
T.B.— T.B. + 1 T.B. + 2 T.B. + 3 Bones and Joints Abdominal Other Organs Observation		3 1 1 - 6 - -	3 -	5 3 13 9 - 1	3 9 11 7 - 1 2	1 1 - 1 -		1 1 2 1 -	-		21 16 28 21 19 2 2
Total	20	11	3	31	33	3	3	5	_	1	110

Other Forms of Tuberculosis.

Beds are not retained for treating non-pulmonary tuberculosis, but are requisitioned as required in hospitals and sanatoria which deal specially with this type of case.

93 cases of skin and glandular tuberculosis referred by the Tuberculosis Officer received treatment by actino-therapy at the Municipal General Hospital. 4,730 attendances were made, 7,206 treatments being given under the direction of the Radiologist to the hospital.

X-Ray Diagnosis.

The X-Ray plant formerly in use at the Tuberculosis Dispensary has been transferred to the Municipal General Hospital, where all X-Ray work is now centred. During the year under review 79 patients on the Register of the Tuberculosis Dispensary were submitted to X-Ray examination.

Section 8.

Venereal Diseases.

Venereal Diseases Treatment Centre.

This Clinic was described in my report for 1932 (page 124). No alterations have been made in the premises, personnel, areas served or days and hours on which the clinic is open.

At the beginning of the year 107 cases were under treatment, 17 removed from the register in a previous year as having ceased to attend, returned for treatment during the year, and 236 cases attended for the first time. Thus there were 360 cases under treatment during the year.

Of the new cases, 183 (or 77.5%) were diagnosed as suffering from venereal disease (56 Syphilis, 1 Soft Chancre, 126 Gonorrhœa). 53 were found not to have venereal disease.

The total number of attendances was 5,417 (2,244 for examination by the Medical Officer, and 3,173 for irrigation, dressings, etc.). The total attendances show a decrease of 1,003 over that of the previous year.

The clinic serves a population, in Burnley and the adjacent towns and rural areas, of approximately 217,100. The new cases of venereal disease are equivalent to less than one per 1,000 of the population. Perusal of the figures in the following return shows that the attendances of patients cannot be considered as satisfactory. Regular and prolonged attendance is of the utmost importance in the treatment of venereal disease; the treatment is lengthy; there is no satisfactory method of rapid cure. The average number of attendances throughout the year for individual attention by the medical officer of male cases of syphilis was only 8.6, and for females 7.8. Similarly male cases of gonorrhoea made an average number of 6.2 attendances, and females only 5.7, to see the medical officer. The total average attendances per patient compare unfavourably with those for the whole country.

	Year.	Syp	hilis.	Gono	rrhœa.
	1 ear.	Males.	Females.	Males.	Females.
England and Wales Burnley Clinic	$ \begin{cases} 1933 \\ 1933 \\ 1934 \end{cases} $	12·2 9·2 8·6	12·5 8·4 7·8	32·2 26·9 25·0	23·5 21·6 14·7

It is impossible to dogmatise on the reasons for these irregular and insufficient attendances. They are not worse than in previous years—in fact the attendances for intermediate treatment have shown an improvement in the last two years. Much care is exercised to ensure that reminders to continue treatment are sent regularly to defaulters, but the response cannot be considered satisfactory. The clinic is centrally situated for the whole of the area which it serves and the transport facilities from the populous parts of the area are good. The clinic hours are arranged so that patients who are working may attend after ceasing work. The efforts of the clinic staff in endeavouring to impress upon patients the necessity for prolonged and complete treatment do not appear to have met with much success. Since the present clinic was established, the clinic nurse has been supplied from Victoria Hospital, in the grounds of which the clinic premises are situated. The nurse is ordinarily employed on work in the hospital and attends the clinic for the female sessions and for intermediate treatment in the evenings. I am of opinion that if the clinic nurse were directly on the whole time staff of the Health Department, with her primary duties that of the clinic, more interest would be taken and closer personal contact established between the nurse and the female patients, which would be reflected in more regular attendances of female cases.

The cost of the Venereal Diseases Scheme during 1934 was equivalent to 4/1d. per patient attendance.

RETURN relating to all persons who were treated at the Treatment Centre at Burnley during the year ended 31st December, 1934.

	Syl	hilis	Soft C	hancre	Gono	orrhœa	othe	itions r than ereal		TOTAL	s
	М.	F.	М.	F.	M.	F.	M.	F.	M.	F.	Totals
Number of cases on 1st Jan- under treatment or observation Number of cases removed from the register during any previous year which returned during	32	21		_	42	11	1	_	75	32	107
the year under report for treatment or observation of the same infection	6	3	_	_	8	_		-	14	3	17
under report (exclusive of cases under Item 4) suffering from: Syphilis, primary ,, secondary	$\frac{14}{2}$	2 3	_	_	=	_	_	=	$\frac{14}{2}$	2 3	16 5
,, latent in 1st year of infection, all later stages, congenital	 8 5 	14 8 —	<u>-</u> - <u>1</u>	_ _ _		_ _ _ _		_ _ _	- 8 5 1	14 8 —	$\frac{-}{22}$ 13 1
Gonorrhea, lst year of Infection Inf	Ξ	=	=	_	96 —	24 		<u>-</u>	$\frac{96}{42}$	$\frac{24}{11}$	$\begin{array}{ c c }\hline 120\\ \hline 53\\ \hline \end{array}$
received treatment at other Centres for the same infection	_		_	_	5	1		_	5	1	6
OTALS OF ITEMS 1, 2, 3 AND 4	67	51	1		151	36	43	11	262	98	360
Number of cases discharged after completion of treatment and final tests of cure (see Item 15)	7	5	_		81	22	42	11	130	38	168
Syphilis, primary secondary latent in 1st year of	$\frac{2}{1}$	1 1	=	=	=	=	_	=	2 1	1	3 2
infection ,, all later stages		$\frac{}{3}$		Ξ	Ξ		=		5 1	- 3 2 -	8 3 —
Soft Chancre	_	- 1		- 1							
Soft Chancre	=	=	=	=	 8 1		_	Ξ	8	<u>2</u>	10
Soft Chancre	4	= -	=			2 - 4	_	_	20	4	10 1 24
Soft Chancre	4				1	_	_	_	1	_	1
Soft Chancre			_ _ _ _ _		1	4		_	20	4	24

⁽These totals should agree with those of Items 1, 2, 3 and 4)

	Syr	hilis	Soft C	hancre	Gono	rrhœa	other	than ereal	Т	OTALS	
	М.	F.	M.	F.	M.	F.	M.	F.	M.	F.	Tota
10. Number of cases in the following stages of syphilis included in Item 6 which failed to complete one course of treatment: Syphilis, primary latent in 1st year of infection all later stages	1 -4 -		=		=	=	=	=	1 -4 -	_ _ _ _ _	
11. Number of attendances: (a) for individual attention of the medical officers (b) for intermediate treatment e.g., irrigation, dressing	576	397	1	_	933	207 324	99	31	1609 2849	635	224
Total Attendances	576	397	1		3782	531	99	31	4458	959	541
12. In-patients: (a) Total number of persons admitted for treatment during the year (b) Aggregate number of "inpatient days" of treatment given	_	-	_	_	1 37	 - -	_		1 37		37
	Under	l year		under	5 and 15 y	under		years l over		Total	s
13. Number of cases of congenital syphilis in Item 3 above classified according to age periods	M.	F.	М.	F. 2	M.	F. 3	M. 4	F. 3	M.	5	F. 8
		Arse	enobenz	ene Cor	npound	ls	Mercur	y	В	ismuth	1
14. Chief preparations used in treat of Syphilis:(a) Names of preparations(b) Total number of injections (out-patients and in-patients)		· {	Khars	narsivai sulphan 562			_		Colloso	1 Bism 120	uth
15. Are the tests recommended in M V21 as amended by Memo. followed in deciding as to the charge of the patient after treat and observation for syphilis gonorrhea?	V21A e dis- tment and modi-		r Syphil	a:— N	o Instil		onorrho	NO ₃			

		Micros	copical	copical Serum Tests		
6. F	athological Work:—	for spirochetes	for gonococci	Wassermann	Others for Syphilis	for Gonorrhæa
(a)	Number of specimens examined at and by the medical officer of the treatment centre	The Medical	Officer at the Tr	eatment Centre	is Director of L	aboratory.
(b)	Number of specimens from patients attending at the centre sent for examination to an approved laboratory	13	442	187	187 Precipitation Tests as a control of Wass. Test.	_

Statement showing the services rendered at the Treatment Centre during the year, classified according to the areas in which the patients resided.

t	me of County or County Borough (or Country in he case of persons residing elsewhere than in Eng- and and Wales) to be inserted in these headings.		Lancs. County Council	West Riding County Council	London	Liver. pool	Total
A.	Number of cases in Items 3 and 4 from each area found to be suffering from:— Syphilis	$\frac{36}{71}$	19 1 51 21	$-\frac{1}{2}$	<u>-</u> 1	<u>-</u> 1	56 1 126 53
	Total	136	92	6	1	1	236
В.	Total number of attendances of all patients residing in each area	3953	1400	55	5	4	5417
C.	Aggregate number of "In-patients days" of all patients residing in each area	37	_	_	_		37
D.	Number of doses of approved arsenobenzene compounds given in the out-patient Clinic and in-patient Department to patients residing in each area		188	13	-	_	562

Supplies of Arsenobenzene Compounds.

These are available at the Public Health Department for private medical practitioners whose names are upon the approved register. Seven doctors on the list, together with the Resident Medical Officers of the Hospitals, availed themselves of this free supply. 161 doses were supplied to them as follows:—

Novarsenobillon	 	 	42
Neokharsivan	 	 	72
Sulfarsenol	 	 	9
Kharsulphan	 	 	38

Pathological Examinations.

These are carried out at the Municipal Laboratory by the Medical Officer of the Treatment Centre, who also acts as the Municipal Bacteriologist.

During the year 2,581 examinations were made:—

For	Spirochetes				 14
,,	Gonococci			•••	 691
,,	Wassermann	Reaction	on	•••	 948
,,	Precipitation	Tests	for	Syphilis	 928

These figures include examinations made in connection with the Venereal Diseases Scheme for local hospitals, for private medical practitioners and for adjacent authorities.

Of these 2,581 examinations 1,642 related to Burnley residents, as follows:—

Nature of Test.		Number of Tests.
For detection of Spirachetes	For Treatment Centre	6
For detection of Spirochetes	For Practitioners	
For detection of Gonococci	For Treatment Centre	216
For detection of Gonococci	For Practitioners	126
For Wassermann Reaction	For Treatment Centre	115
ror wassermann Reaction	For Practitioners	486
n n	For Treatment Centre	115
Precipitation Test for Syphilis	For Practitioners	486

	Nature of Test.		Number of Tests.
	ner examinations:—	For Treatment Centre	31
Cui	nures for Gonococci	For Practitioners	16
luid	Wassermann Reaction	For Treatment Centre	_
inalF	wassermann Reaction	For Practitioners	30
erebro Spinal Fluid	Drawinitation Test	For Treatment Centre	
Cerel	Precipitation Test	For Practitioners	15

Venereal Diseases Act, 1917.

No action has been taken during the year in respect of restriction on advertisements or for the prevention of the treatment of Venereal Disease otherwise than by duly qualified persons.

Section 9.

Maternity and Child Welfare.

Births.

The Notification of Births Acts require that all births should be notified to the Medical Officer of Health within 36 hours of occurrence.

During the year 1934, 1,187 notifications were received relating to 1,125 live births and 62 stillbirths. During the corresponding period 1,137 Burnley live births and 62 stillbirths were registered by the Registrar of Births and Deaths.

The 1,187 live and still births were notified by the following:—

Midwives	•••		•••	 	514
Doctor and Par	rents	•••		 •••	222
Maternity Hosp	pital			 	345
Municipal Hosp	pital		•••	 	106
				-	
					1,187

In 8 instances parents had to be reminded of their omission to notify births.

Births notified by medical men and by trained midwives are not visited until ten days at least have elapsed. The majority of the others are visited as soon as possible after notification.

Attendance at Birth.

The Health Visitors' enquiries showed that of the 1,187 live and still births 128 were attended by doctors, 256 by both doctors and midwives, 349 by midwives only, and 2 by handywomen. The remainder were born in Institutions (345 in the Maternity Hospital, 106 in the Municipal General Hospital and 1 in Victoria Hospital).

Health Visiting.

No new developments or changes in the services provided by the Health Visiting Staff have occurred during 1934. A summary of the work carried out by the Health Visitors is given on page 140.

Midwives' Acts.

Thirty-two midwives notified their intention to practise during the year, compared with 34 in 1933. Thirteen of these notifications related to nurses in the Municipal Maternity and General Hospitals, and 19 to midwives in private practice.

The confinements attended by midwives in private practice were as follows:—

				Certificated.	Uncertificat	ed.	Total.	,
Midwives			•••	17	 2	•••	19	
No. of Confir	nements	attend	led	335	 14	•••	349	

Altogether 185 records of sending for medical help under Rule E. 20 of the Central Midwives' Board were received from Midwives compared with 177 last year. The conditions for which medical aid was sought are as follows:—

Conditions in the Mother.	Certifi- cated Mid- wives.	Bona- fide Mid- wives.	Conditions in the Child.	Certificated Mid-wives.	Bona- fide Mid- wives.
Ante-partum Hæmorrhage Abortion or Threatened Abortion Other Ante-natal	13 5	3	Feebleness or Premature Discharging Eyes Other Conditions	10 1 2	1 -·
Conditions Delayed Labour	23 56	 4		13	1
Occipito-posterior Other Malpresenta-	6			1	4
tions	4	_			
Adherent Placenta	5				
Ruptured Perineum Post-partum	34	1			
Hæmorrhage	2	_			
Pyrexia	4				
Other Conditions	11				
	163	8			
	17:	l			

In addition the following notifications were received from midwives:-

Notificat	ion (of Death of Mother or	Child	•••		12
,,	,,	Stillbirths		•••	•••	24
,,	,,	Liability to be sourc	e of In	fection	•••	6
,,	,,	Artificial Feeding				11
		Laving out dead				1

In accordance with Section 14 of the Midwives' Act, 1918, 110 claims, amounting to £178 14s. 0d., were received from doctors called in by midwives in cases of emergency. These, with one exception, were allowed. In only one instance was the amount not surcharged to the patient.

65 routine visits were paid by the Inspector to the midwives during the year. The Inspector also interviewed midwives at the Health Office on several occasions. One midwife was suspended from practice for 4 weeks on account of infectious disease in her household.

Training of Midwives.

Particulars of the training given to midwifery pupils in Bank Hall Maternity Hospital have been given in previous reports. In 1934 arrangements were made whereby two vacancies each year are reserved for the nurses who have completed their general training in the Municipal General Hospital and have taken first place in the final hospital examinations. In filling other vacancies for midwifery pupils preference is given to nurses who have completed their general training in the Municipal General Hospital.

At the beginning of 1934, 11 nurses were undergoing training, 15 commenced training during the year and 12 completed training before the end of the year. 10 nurses obtained the certificate of the Central Midwives' Board during 1934.

Infant Welfare Centres.

There are six Infant Welfare Centres, at which Clinics are held as follows:—

Owned by the Local Authority:—	Sessions held.	Medical Officer present at
(1) Annexe of Bank Hall Maternity Hospital	2 sessions per week.	1 session per week.
(2) Parker Street	1 session per week.	1 session per week.

Rented by the Local Authority:—	Sessions held.	Medical Officer present at
(3) Ebenezer Sunday School	1 session per week.	t session per fortnight.
(4) Rosegrove Wesleyan Sunday School	l session per week.	l session per fortnight.
(5) Lanebridge Wesleyan Sunday School	l session per week.	l session per week.
(6) Mount Olivet Sunday School	1 session per week.	l session per week.

Attendances.

948 infants under 5 years of age attended the Infant Welfare Centres for the first time during 1934. Of these, 702 were infants under one year of age and 246 were children aged one to five years. The number for the previous year was 1,070. The total attendances of all children during 1934 were 14,770, as compared with 13,718 in 1933. The number of infants under one year of age who attended for the first time represents 62.4% of the total live births notified during the year under review. The Assistant Medical Officer for Maternity and Child Welfare held 4,140 consultations at the Centres during 1934, an increase of 139 over last year.

The average number of attendances during the year per child under one year of age is 14.9.

No separate sessions at the Infant Welfare Centres are held for toddlers.

The attendances of infants and toddlers at the centres were as follows:—

Aged 0—I years,	10,409	attendar	nces or	70.6% 01	the	total
Aged 1—2 years,	2,025	,,	,,	13.7%	,,	,,
Aged 2—3 years,	1,202	,,	,,	8.2%	,,	,,
Aged 3—4 years,	823	,,	,,	5.6%	,,	,,
Aged 4—5 years,	291	,,	,,	2.0%	,,	,,

Children under 5 years of age are referred from the Infant Welfare Centres to the School Clinic for treatment of minor ailments, vision defects, chronic enlargement of tonsils and adenoids, dental defects and orthopædic conditions. During 1934, 119 pre-school children made 862 attendances for treatment of minor ailments.

There was a slight decrease in the percentage of newly born infants who attended the Centres during 1934, as compared with the previous year. The number, however, continues to be satisfactory, but there is a marked falling-off of attendances after the children attain their first birthday. By this time the common difficulties experienced by mothers in feeding their infants have in some measure ceased, and mothers naturally consider it less necessary to continue regular attendance. There are many conditions which occur in toddlers for which the advice of the doctor at the Centre may be usefully sought. Although a considerable proportion of mothers attend with the children during the latter's second year of life, comparatively few bring children between the ages of 3 and 5 years to the Centres. The Health Visitors visit regularly and advise regarding these children, but there is an advantage in having them submitted to periodic medical inspections. Too often parents wait until some definite illness, often avoidable, manifests itself, before medical opinion is sought. Every effort is made to persuade mothers to bring their 3 to 5 year old children to the Centres for inspection by the doctor, but it is not possible, without additional medical staff, to organise routine medical examination at fixed intervals of all such young children.

PARTICULARS OF WORK AT THE INFANT WELFARE CENTRES DURING THE YEAR, ARE AS FOLLOWS:-

			12.	1					
No. in at'ndance	year and	l—5 years	200	268	187	146	134	293	1228
at'nc	year and	nuder	101	86	66	1 9	51	161	574
	Weighed	Children over l yr.	484	753	559	577	514	1245	4132
	Weig	sinsin!	1804	1632	1547	1505	1263	2674	10425
of 'owe'	ations	Children over l yr.	129	403	297	248	136	276	1489
No. of	Consultations	stastal	354	513	588	503	104	589	2651
		Doctor Attendar	24	48	50	48	24	51	245
		gsravA raq sessioi	76	87	40	40	38	40	:
		orand IstoT	2322	2415	2018	2071	1863	4081	14770
	al	dnent Snpse-	2165	2196	1848	1976	1779	3858	13822
	Total	lst	157	219	170	95	84	223	948
	yrs.	-psqng	39	65	16	99	40	39	265
	1 1	1st	က	12	7	61	1	હા	26
	yrs.	dneut Snbse-	68	157	100	102	100	215	763
	3-4	lst	4	19	16	1	∞	12	09
TTENDANCES	yrs.	dneut -esqug	131	199	181	51	121	443	1126
ATTENI	2—3	lst	9	28	16	ŭ	7	14	16
	yrs.	dneut 2npse-	235	272	211	322	297	604	1941
	1—2	lst	11	25	23	6	7	о ———	84
	Under 1 yr.	Subse-	1671	1503	1340	1435	1221	2557	9727
	Unde	lst	133	135	108	78	65	186	702
	No.	of Sess- ions	20	20	51	52	6#	103	355
		CENTRE	Ebenezer	Lane Bridge	Parker Street	Mount Olivet	Rosegrove	Bank Hall	Total

Ante-Natal and Post-Natal Care.

Ante-natal supervision is available at three clinics, Bank Hall Maternity Hospital, Parker Street and Rosegrove. No alteration in the days and times of the clinics has been made during 1934. These clinics are advisory and of a preventive character and treatment is not given. Patients in need of treatment are referred to their private doctors, or, if necessary, admitted for ante-natal treatment to the Bank Hall Maternity Hospital or the Maternity unit of the Municipal General Hospital. Milk or meals are supplied free or at cost price to necessitous mothers on the recommendation of the medical officer of the clinic, provided such are required for medical reasons.

Six hundred and twenty-nine expectant mothers attended the ante-natal clinics during 1934, equivalent to 53% of the births notified during the year. This percentage corresponds closely with that of the previous year. Of these 516 were new cases who attended for the first time during the year.

The attendances at the Ante-Natal Clinics during 1934 are as follows:—-

Clinic	Times Open	Number	of Expectant Mothers Attending for the first time Attendance		Post- Natal Attendances	Total Attendances	Average per Session
Bank Hall Clinic	105	482	375	2708	101	3184	30.3
Parker Street	51		131	301	20	452	9.0
Rosegrove	25	147	10	112	3	125	4.5
Totals	181	629	516	3121	124	3761	

A large number of the Bank Hall Ante-natal Clinic cases were confined in the Maternity Hospital. These cases, in addition to having a careful examination before discharge, are encouraged to report six weeks later for a further examination. The following table shows how the Ante-natal Cases were referred to the clinics during 1934:—

		Referred by Private Medical Practitioners	Referred by Midwives	Referred through Child Welfare Clinics, etc.	Came of own accord	Total
Bank Hall Clinic		 60	5	10	300	375
Parker Street Clinic	·	 3	83	2	43	131
Rosegrove Clinic		 		-	10	10
TOTAL		 63	88	12	353	516

The following table shows the use that has been made of the Ante-natal Clinics during the last ten years:—

	19	25	19	26	19	27	19	28	19	29	19	30	19	31	19	32	19	33	19	34
	New Cases	Total Attendances																		
ank Hall Clinic	404	1994	314	1828	361	2429	427	2217	420	2874	405	2302	376	2472	416	2739	423	3354	375	3184
arker Street	94	168	88	232	101	202	88	213	94	225	98	206	107	312	72	274	110	341	131	452
osegrove previously Lowerhouse)	2	14	8	43	11	35	2	18	13	27	17	31	19	48	23	56	9	57	10	125
TOTAL .	500	$\frac{-}{2176}$	410	${2103}$	473	2666	517	${2448}$	527	$\frac{-}{3126}$	520	2539	502	2832	511	3069	542	3752	516	3761

Towards the end of 1934, two schemes were approved to ensure more adequate ante-natal care and attendance at confinements. These schemes came into operation on 1st March, 1935.

The first scheme was formulated to encourage the employment of midwives in necessitous cases where a doctor only is engaged for the confinement and the patient is unable to pay the fee of a midwife also to act as a maternity nurse. Under this scheme,:—

- (1) Any doctor, who is engaged for a confinement, may certify in writing to the Medical Officer of Health that a midwife also is necessary or desirable, and that the patient does not appear to be able to afford to pay a midwife to act as Maternity Nurse.
- (2) The patient is then asked to supply to the Medical Officer of Health particulars of the household income, and a "scale of necessity" is applied.

- (3) If the patient comes within the scale of necessity, the Local Authority guarantees to pay the fee of the midwife.
- (4) The patient is notified if she is granted assistance as above. She can then choose any registered midwife whom she or the doctor desires.
- (5) The patient hands the authorisation form which she receives from the Medical Officer of Health, to the midwife, and the midwife claims the authorised amount from the Local Authority.
- (6) When the Local Authority agrees to pay the fee of the midwife, the midwife must attend the confinement, and thereafter make morning and evening visits for the first three days of the puerperium, and at least one visit each day from the 4th to the 10th day of the puerperium.
- (7) The fee paid to the midwife, acting as Maternity Nurse, is 35s. when the Local Authority agrees to pay the cost in necessitous cases.

The second scheme, which provides for ante-natal examinations of necessitous pregnant women to be carried out by private medical practitioners, is as follows:—

- (a) Where uninsured pregnant women engage midwives only for their confinements and are unable to afford ante-natal examinations by their private doctors, the patients may be referred by the midwives to their usual medical attendants for the necessary ante-natal and post-natal examinations.
- (b) In the event of the usual medical attendant not being willing to undertake the work of this Scheme, the midwife will refer the patient to some other practitioner of the patient's choice.
- (c) The patient will ordinarily be delivered by the midwife who is engaged, but in the event of any abnormality or emergency she will send for the practitioner who undertook the ante-natal examinations, using for the purpose the "medical aid forms," as required by the Rules of the Central Midwives' Board and the Midwives' Acts.
- (d) Practitioners agreeing to undertake this service are to undertake, as far as practicable, to attend the patient in emergency, if sent for by the midwife.
- (e) The practitioner must undertake to make the following examinations:—

The first ante-natal examination within 10 days of the date on which the midwife is engaged; a second ante-natal examination in the 36th week of pregnancy; a post-natal examination between the 4th and 6th week after confinement. Additional examinations should be carried out by the practitioner, if he considers them advisable.

(f) The Council will pay to the practitioner a fee of 5s, for each examination under the Scheme, the fee to cover also a report on the case from the practitioner to the midwife and the Medical Officer of Health.

The maximum fee to be paid for any one patient is 15s.. If less than three examinations are carried out, fees for the actual number of examinations will only be paid.

- (g) The ante-natal and post-natal examinations, to take place either at the patient's home or at the doctor's surgery.
- (h) The midwife to be present at the examinations whenever possible and the doctor to give the midwife a report on his findings. He must inform the midwife of any abnormalities and whether he considers that a doctor will be necessary at the confinement.
- (i) Intermediate ante-natal examinations will be carried out by the midwife. This is obligatory to her, in accordance with the rules of the Central Midwives' Board. If the midwife discovers any abnormality, she is to refer the case immediatly to the medical practitioner, using for the purpose the "medical aid form," according to the rules of the Central Midwives' Board.
- (j) In referring patients to practitioners in the first instance, midwives are to use the forms supplied by the Public Health Department, and copies must be forwarded to the Medical Officer of Health.
- (k) In reporting on patients practitioners are to use the forms supplied by the Public Health Department, and one copy is to be given to the midwife after each examination and one copy is to be forwarded to the Medical Officer of Health.
- (l) If, as a result of an ante-natal examination, a medical practitioner is of the opinion that the patient's condition necessitates removal to hospital for ante-natal treatment, he shall immediately refer the case to the Bank Hall Ante-Natal Clinic, or, if the patient is unable to attend the clinic, he shall communicate with the resident medical officer of Bank Hall Hospital, who will make arrangements for the admission of the patient to the ante-natal ward.
- (m) Nothing in this Scheme is to prevent a patient attending the Council's ante-natal clinic, if she so desires, and patients desiring or requiring to enter the Maternity Wards of the Municipal Hospitals for their confinements are to be referred to the ante-natal clinic at Bank Hall Hospital.

(n) Medical practitioners who do not conform to all the requirements of the above Scheme may be excluded from participating in the Scheme, by the Medical Officer of Health.

SERVICES ANCILLARY TO THE SCHEME.

- (o) The services of the Consulting Obstetrician will be available to any general practitioner who needs assistance in difficulty or complication arising during pregnancy, or at confinement, or during the lying-in period or in cases of Puerperal Fever and Pyrexia.
- (p) The Council's Laboratory and Bio-chemical facilities will be available for any bacteriological and bio-chemical examinations, free of charge, in connection with the Scheme. To ensure that no charge shall be made, the specimens must be marked "Ante-Natal Scheme."
- (q) Patients found, at ante-natal examinations, to require dental treatment as a necessary adjunct of ante-natal care, to ensure a safe confinement, and who in the opinion of the practitioner cannot afford to obtain private dental treatment, are to be referred to the Medical Officer of Health, so that an appointment may be made with the Council's dental surgeon for advice and treatment.
- (r) If, as a result of ante-natal or post-natal examination, the medical practitioner considers that a supply of milk is essential to safeguard the health of the mother, and the patient cannot afford to purchase extra milk, such milk will be supplied by the Council, after application of a scale of necessity.
- (s) Sterilised maternity outfits will be supplied at cost price or free of charge according to the necessity of the case, on application by the patient or the midwife to the Public Health Department and after application of a scale of necessity.
- (t) If, as a result of ante-natal examination, a patient is removed to hospital for confinement, a midwife who has been booked for such case will receive 7s. 6d. from the Council as compensation for the loss of the case, subject to the Medical Officer of Health being satisfied that the midwife was definitely engaged. No payment is to be made where the patient herself has applied to be confined in hospital.

Services of Consulting Obstetrician (Memorandum 156/M.C.W.)

The Obstetrical Specialist, in addition to examining cases with complications referred to him at Bank Hall Clinic, was called in consultation at patients' homes on 31 occasions. The specialist is also on the part-time staff of the Bank Hall Maternity Hospital, the Municipal General Hospital and the Infectious Diseases Hospital, and is consultant under the Public Health (Notification of Puerperal Fever and Puerperal Pyrexia) Regulations, 1926. His services are available, therefore, for all complications of pregnancy, labour or the puerperium, either in the hospitals, ante-natal clinic, or patients' homes.

The Obstetrician was called in consultation by private medical practitioners in connection with the following complications occurring in patients' homes.

		1	No. of		
COMPLICATIONS OF PRE	GNANCY.	(CASES.		DISPOSAL OF CASES.
Incomplete Abortion			3	•••	2 admitted to hospital. 1 treated at home.
Appendicitis			1		Admitted to hospital.
Albuminuria			1		do.
Hyperemisis Gravidarum	•••		1		do.
Disseminated Sclerosis			1		do.
Malpresentation			1		Treated at home.
Pyelitis			1.		do.
Cardiac Disease			2		do.
COMPLICATIONS OF LAB	OUR.				
Failed Forceps	•••		4		Treated at home.
Pneumonia			1		do.
Uterine Inertia			1		do.
Laceration of Sphincter A	Ani		1		do.
Breech			2		do.
Other Malpresentations			1		do.
Placenta Prævia			1		do.
Adherent Placenta			1		do.
Ectopic Gestation			1		Admitted to hospital.
Brow Presentation			1		do.
Persistent Occipito—Post	terior	•••	1		do.
Contracted Pelvis			2		1 admitted to hospital.
					1 treated at home.
Complications of Pub	RPERIUM.				
Puerperal Pyrexia			2	•••	1 admitted to hospital.
					1 treated at home.
Post-Partum Hæmorrhag	e		1	•••	do.
			-		
Total Domiciliary Consul	tations	•••	31		
			_		

Bank Hall Maternity and Children's Hospital. The Maternity Unit. (21 Beds).

The number of women who entered the Maternity Hospital for their confinements numbered 364. This is 57 fewer than in the previous year, which was the peak year of the hospital. 345 babies were born; of these 24 were still births and 13 died within 10 days of birth. There were 3 cases of twin births.

Thirty-one of the 342 women delivered during the year were emergency cases, admitted on account of some complication arising shortly before or after the onset of labour. Apart from these, all the women who were admitted had engaged beds previously and received ante-natal supervision at the clinic attached to the hospital. The number of babies born in Bank Hall Hospital represent 29.5% of the total births registered during the year.

Of the 364 admissions, 20 or 5%, were patients from adjacent districts.

The admissions, discharges and deaths of maternity cases are as follows:—

In Hospital	on 1st	Janua	ry, 193	84	•••	•••		•••		18
Admissions										364
Re-Admissions	·							•••		1
Discharges										362
T3 1										4
Remaining in	Hospi	tal on 3	31st De	ecembe:	r, 1934					17
Number Admi	tted f	or Ante	-natal	Treatn	nent on	ly				24
Number of Wo	omen	delivere	ed duri:	ng the	year	• • • •				342
Average durat	ion of	f stay o	of all c	ases (i	e., Cor	ifineme	nt and	Ante-	natal (cases)
13.5 days.				•						

Average duration of stay of confinement cases only—11.9 days. Daily average number of beds occupied—13.5.

More detailed Statistics will be found in the Appendix.

Owing to the continued depression in local industries, the majority of the women admitted to the maternity wards were able to pay, on assessment, only the minimum charge for maintenance and treatment. The assessments of the cases during 1934 were as follows:—

				£	s.	d.	per week.
251 cases at	•••			 1	1	0	per week.
45 cases at				 2	2	0	per week.
35 cases at				 3	3	0	per week.
9 cases at				 4	4	0	per week.
11 County ca	ises at			 0	10	6	per day.
1 Rawtenst	all Corp	oratio	on	 4	4	0	per week.
5 Brierfield	Urban	Distri	ct	 4	4	0	per week.
7 Public As	sistance	cases	at	 1	12	6	per week.

The Children's Unit. (24 Cots for Children up to 5 years of age).

The admissions and discharges are as follows:—

Number of Children in Hospital on 1st January, 1934 2												
Number of Children admitted during the year 1												
Total und	der treatment		• • •	•••	•••	•••	•••		157			
Number :	Discharged:—											
(1)	In Good Health								69			
(2)	Improved			•••					27			
(3)	Not Improved								12			
(4)	Removed by Parer	nts			•••	•••			6			
Number	of Deaths	•••			•••				18			
Remaining in Hospital on 31st December, 1934 25												

The diseases from which the children were suffering are given in the Appendix.

Milk and Meals for Children and Expectant and Nursing Mothers.

The amount of milk and meals issued free has again shown an increase. 243 children and 490 expectant and nursing mothers received assistance as compared with 231 children and 317 mothers in 1933. Although the amount of milk issued exceeded that of the previous year by 10,696 pints, the increased cost was only £2 6s. 10d., owing to the substitution of pasteurised milk for Grade A milk. Meals provided in 1934 showed an increase of 2,098 over the number for the previous year, the expenditure having increased by £86 1s. 6d. Meals are provided from the Education Committee's Central Kitchen, the Health Committee paying the Education Committee 9d. per meal for an adult and 6d. per meal for a child. A revision of these charges is under consideration at present. The regulation that extra nourishment shall be granted on medical grounds only, and not on account of sociological conditions, is adhered to strictly. New milk only is provided.

The grants made during the year are as follows:—

		er Assisted Reduced	Amount of Milk granted	Cost to the Authority
MILK :-	Free	Cost	Pints	£ s. d.
Children	233	1	19,684	
Nursing Mothers	243	1	22,876	> 533 13 4
Expectant Mothers	132	2	8,232	ا ا
TOTAL	608	4	50,792	533 13 4

FREE MEALS :—		Cases	No. of Meals supplied	Cost to the Authority £ s. d.
Children	 	 9	364	9 2 0
Nursing Mothers	 	 49	3,332	124 19 0
Expectant Mothers	 	 63	3,554	133 5 6
TOTAL	 	 121	7,250	267 6 6

Home Nursing and Home Helps.

The Council has an arrangement with the Burnley District Nursing Association to provide Home Nursing services for the following cases:—expectant mothers, maternity nursing in cases in which a midwife is suspended from attendance, cases of puerperal fever and pyrexia, ophthalmia neonatorum, and measles, whooping cough and epidemic diarrho a in young children.

The following cases were referred to the Association:—

Disea	se.				Cases.	Visits by Nurses.
Ophthalmia	Neonato	rum	• • •	 	3	 251
Pemphigus			•••	 •••	1	 7
					4	 258
					_	

Although arrangements are in operation for the provision of home helps, and a list of suitable women to act as such is kept, there continues to be no demand for domestic assistance in the lying-in period and no home helps were supplied during 1934.

Dental Treatment.

The scheme for the dental treatment of expectant and nursing mothers and young children has been in operation for 9 years. Cases are referred by the medical officers of the Ante-natal and Infant Welfare Centres and are dealt with by the Corporation dentist at the School Dental Clinic on Saturday mornings. Dentures for mothers are made by a private dentist and supplied at prices according to the scale of the Public Dental Service Association. Mothers pay part cost of the dentures according to their means. Forty-four dental treatment sessions were held, the treatment given being as follows:—

	No. of			Anæs	thetics			
	Cases	Attendances	Extractions	Local	General	Fillings	Scalings	Dressings
Mothers	 . 72	216	264	248		21	14	20
Children	 . 48	69	55	51	2	5	_	12

Five mothers were supplied with dentures.

Maternal Mortality.

Uterine Inertia ... Cæsarean Section ...

Puerperal Fever

17 women died in or in consequence of childbirth, equivalent to 14.6 maternal deaths per 1,000 live and stillbirths. The maternal mortality per 1,000 live and stillbirths for the last ten years is as follows:—

1925	1926	1927	1928	1929	1930	193	l	1932	1933	1934
7.3	3.7	7-9	3.3	5.0	4.4	5.8	3	6.5	6.5	14.6
he regi	stered o	auses of	f Deaths	s were:-						
Aborti	ion	•••								3
Ruptu	ired Tub	oal Pregi	nancy		•••			•••		1
Toxic	Albumi	nuria of	Pregnai	ncy						4
Eclam	nsia									2

All deaths of women who died in or in consequence of childbirth, and women dying in the puerperium from diseases not directly connected with pregnancy were investigated and reported to the Ministry of Health. In all twenty-two deaths were investigated.

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The high death rate associated with childbearing in 1934 is a cause of some concern. It is more than double the average rate of the previous ten years,—this despite the fact that never before have there been better antenatal supervision by midwife, doctor and clinic and more facilities for specialist advice and hospital treatment. A perusal of the following summary of the investigations into deaths associated with childbearing shows that half the deaths occurred in women having their first babies. In nine cases the women had no ante-natal care prior to the confinement or abortion. In seven instances death could probably not have been prevented, but in the remaining fifteen there is a possibility that, with ante-natal supervision or the intelligent cooperation of the patient in complying with medical advice or specialist treatment, a fatal termination might have been avoided. In three of these cases it appears that specialist advice should have been sought earlier in the illness, and as the Local Authority provides the services of a specialist for such cases, there seems to be no justification for not taking early advantage of his services. Lack of intelligent co-operation of the patient was an important factor contributing to a fatal termination in eight cases; in these the patients either refused to take the advice of the health visitor and midwife to have ante-natal supervision by a doctor or refused to enter hospital when first advised or left hospital against medical advice.

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DEATHS OF WOMEN SHOWING RECENT CONNECTION WITH CHILDBIRTH.

Might death have been prevented	Yes. If patient had sought advice earlier.	Ves. By ante-natal care and co-operation of patient.	No	Yes. By earlier treatment in hospital.	No	Yes. By earlier specialist advice for contracted pelvis.	Ves. By ante-natal care and co-operation of patient.	No	Yes. By ante-natal care and co-operation of patient.	Ves. By co-operation of patient, who left hospital against advice.	Yes. By earlier specialist treatment.
Treatment	Emergency admission to hospital	Emergency admission to hospital. Septic burns and +++ Wasserman	Confined in hospital. Abscesses developed after discharge	In hospital	In hospital	In Nursing Home	Emergency admission to hospital	Emergency admission to hospital	Emergency admission to hospital	In hospital	Emergency admission to hospital
Cause of Death	Chronic Interstitial Nephritis	Puerperal Fever	Septicæmia following mammary abscess	Pyonephrosis. Toxic Albununuria	Pulmonary Embolism Ascending Pyelitis	Acute dilatation of Stomach following Cæsarean Section	Eclampsia. Fracture of skull	Ruptured Tubal Pregnancy	Puerperal Fever. Nephritis	Chronic Nephritis and Heart Disease	Post-operative shock Cæsarean Section. Heart Disease
Midwife Engaged	No	No	No	No	No	No	No	No	Yes	No	Yes
Doctor Engaged	No	No	Yes	Yes	No	Ves	No	No	Yes	No	Yes
Ante-Natal Care	No	No	Yes	Yes	Yes	Yes	No	No	No	Yes	Yes
Pregnancy	7th	2nd	1st	lst	lst	lst	8th	2nd	lst	lst	lst
Age	#	£ 2	333	34	25	31	38	27	ç1 ç1	34	333

DEATHS OF WOMEN SHOWING RECENT CONNECTION WITH CHILDBIRTH.

Might death have been prevented	Yes. By intelligent co-operation of patient.	Yes. By ante-natal care.	Yes. By ante-natal care.	Yes. By earlier ante-natal care in hospital, which was advised.	No	No	Yes.	Yes. By better obstetric facities and specialist treatment.	No	No	Yes. By ante-natal care.
Treatment	In hospital	Emergency admission to hospital	Emergency admission to hospital.	Emergency admission to hospital	Emergency admission to hospital	Emergency admission to hospital	Emergency admission to hospital	At home	Emergency admission to hospital	Confined in hospital	Emergency admission to hospital
Cause of Death	Toxic Albuminuria	Eclampsia	Incomplete Abortion	Rupture of Uterus, following concealed accidental hæmorrhage	Pyæmia Abortion. Heart Disease.	Eclampsia	Septicæmia following* Procured Abortion	Uterine Inertia	Eclampsia	Peritonitis. Degenerated Mesenteric Cyst. Heart Disease	Post-partum Hæmorrhage. Abortion
Midwife Engaged	Yes	No	No	o Z	No	No	Νο	Yes	No	Yes	No
Doctor Engaged	No	No	No	No	No	Yes	No	Yes	Yes	Yes	No
Ante-Natal Care	Yes	No	No	Yes	Yes	Yes	No	Yes	Yes	Yes	No
Pregnancy	3rd	lst	4th	6th	2nd	lst	3rd	lst	2nd	lst	4th
Age	36	23	31	37	31	24	25	ę;	31	& ci	13

Puerperal Fever and Pyrexia.

Arrangements are in operation for investigation of notified cases, the services of a consulting obstetrician both in the patient's home and in hospital, the bacteriological examination, hospital treatment and home nursing of cases.

Seven notifications of puerperal fever were received during the year, equivalent to 6.0 per 1,000 births. Five were cases showing complications during or after labour, for which they were admitted in emergency to hospitals, and were notified from hospitals.

Sixteen cases of puerperal pyrexia were notified, fourteen of which were from hospitals. Only two cases were notified from and nursed in their own homes. It may be assumed that many cases, confined in their own homes, showing pyrexia during the puerperium have not been notified.

The incidence and deaths from puerperal fever during the last ten years are as follows:—

	1925	1926	1927	1928	1929	1930	1931	1932	1933	1934
Cases notified Cases per 1,000	4	2	6	4	7	8	7	4	4	7
Births	2.4	1.2	4.0	2.7	5.0	6.0	5.0	3.2	$3 \cdot 2$	6.0
No. of Deaths	_	1	1	_	3	3	2	2	4	4

Ophthalmia Neonatorum.

Six cases were notified during 1934, of which three occurred in hospitals. In accordance with the arrangements for home nursing, the district nurses attended three cases in their own homes, making 251 visits altogether.

The incidence of ophthalmia neonatorum and the results of treatment of cases during the last five years are as follows:—·

		1930	1931		1932		1933	1934
Cases notified		17	 15	• • •	16		10	 6
Rate per 1,000								
registered births		12.7	 11.6		13.7		9.0	 $5 \cdot 1$
Treated at home		16	 11		12		4	 3
Treated in hospital		1	 4		4		6	 3
Vision unimpaired	•••	15	 14		15		9	 6
Vision impaired			 				1	
Total blindness			 _		1		_	 _
Deaths		_	 					 _
Left town before com	1-							
pletion of treatmer	ıt	2	 1			•••		 _

Pemphigus Neonatorum.

Breech

Compound presentation

Three cases occurred in the Bank Hall Maternity Hospital and were transferred to the Municipal General Hospital for treatment. One death occurred.

Still-Births.

Sixty-two still-births were notified during 1934, compared with sixty-eight in 1933. Investigation into still-births is carried out by the Health Visitors.

The following is a summar	y of	the	information	obtained:—
---------------------------	------	-----	-------------	------------

Still-births	occurring	at h	ome			 	29
,,	,,	in H	Iospita	ıls		 •••	33
							_
							62
,,	"	in P	rimipa	ıra	•••	 	27
,,	,,	in M	Iultipa	ra		 	35
DURATION	of Pregn	ANCY	7.				
Full to	erm .					 	29
Prema	ture .					 	30
Not as	scertained					 	3

In order to trace any factors contributing to the still-births, the following particulars were obtained:—

Ante-partum hæm	٧,		•••	• • •	• • •	 •
Hyperemesis Grav	idarum	ı				 2
Albuminuria						 4
Induction of Labor	ur (for	Albun	nin)			
Eclampsia						
Cardiac Disease				•••		
Hydramnios						
Uterine Inertia]
Specific Disease]
Diabetes			•••			 9
Contracted Pelvis	(Cæsar	ean Se	ction)]
Prolonged or Diffic	cult La	bour	•••			 ç

5

1

				•					
Con	NDITIONS IN CHILD.								
	Twin							1	
	Hydrocephalus							1	
	Monster							1	
	Cord round neck							2	
	Injury to Cord							1	
	Prematurity		•••					11	
	No Cause	•••		•••				10	
	Not ascertained	•••	•••	•••	•••	• • •	• • •	4	
								_	
								62	
- 0								_	
	ife Protection.	, .	1 .1	,					
	e supervision of infai								
	intenance for rewar				y the I	Health	Visito	ors.	All the
children	were found to be	wen ca	ared 10	or.					
The	e following return rel	ates to	the ac	lminist	ration	of Part	I. of	the (Children
	08, as amended by								
, ,	•				Ü				
(a)	Number of persons		_					10	
	Register at the e	na oi t	ne yea	ır	•••	•••	•••	13	
(b)	Number of children	on th	e Regi	ster:—					
	(i) at the end	of the	year					14	
	(ii) who died	during	the ye	ear				_	
	(iii) on whom	inques	ts were	e held d	during t	the yea	r		
(c)	Number of Infant	Protec	tion V	isitors	at the	end of	the		
(0)	year who were:-			151015	at the	ena oi			
	(i) Health Vi							5	
	(ii) Female, o								
	(iii) Male						•••		
(d)	Number of persons								
(1)	under (c) above)								
	to Section 2 (2) of					the pro	V 130		
()	` '				•••	•••	•••		
(e)	Proceedings taken			ar.—					
	Number of Cas			talzan	NH				
	Section of Act								
(f)	Number of cases in			local au	ithority	has g	iven		
	a sanction during			C		1000			
	(i) Under (a)						• • •	_	
	(ii) Under (b)								
	(iii) Under (c)	of Sect	non 3 (of the A	Act of]	1908	•••		

(g) Number of orders obtained during the year under Section 67 of the Act of 1932:—

(i) from a Court of Summary Jurisdiction ... (ii) from a Single Justice

Boarded-Out Children.

All children boarded-out in the town are visited and supervised by the Health Visitors. The number of children boarded-out in Burnley on 31st December, 1934, was as follows:—

Burnley Public Assistance Cases			10
Lancashire County Public Assistance Cases			8
Blackpool Public Assistance Cases			2
Cheshire County Public Assistance Cases			2
			_
Total	•••	•••	22

Actino-Therapy.

Actino-therapy for pre-school children, school children and pregnant and nursing mothers is available at the "light" clinic attached to Bank Hall Infant Welfare Centre. Two sessions are held weekly for out-patients and two sessions for in-patient children in Bank Hall Hospital. Additional treatment, when necessary, is given by appointment. Three mercury vapour lamps are in use.

Debilitated, malnourished and physically retarded children and debilitated mothers are referred for treatment. The following is a summary of the work carried out:—

BANK HALL ARTIFICIAL SUNLIGHT CLINIC.

			Total		RESULT		Remaining
	New Cases	Remaining from 1933	under	Improved	I.S.Q.	Treatment Discontinued	at end of 1934
In-patients, Children's Ward, Bank Hall Hospital	15	9	57	88	ଚା	9	11
Cases referred from Child Welfare Centres	a	97	106	1	∞	, e.i	80
Pregnant and Nursing Mothers	9	1	1-	?1		10	
	137	33	170	85	10	36	39

Orthopædic Treatment.

No new developments or changes have been effected in the orthopædic scheme during 1934. A full report on the work of the orthopædic clinic, with separate statistics of school children, and children under school age, are given on pages 33 to 39 of my Report as School Medical Officer, which is bound with this Report.

Thirty-two children under 5 years of age were examined by the orthopædic surgeon, equivalent to 7.7% of the total cases seen at the orthopædic clinic. They suffered chiefly from congenital deformities, bone deformities resulting from infantile rickets and birth palsies. Only 3 cases required treatment in an orthopædic hospital, the remainder having their defects corrected by massage, splints or other appliances. A further 47 pre-school children were given remedial exercises, breathing exercises or corrective treatment for postural defects.

The absence of routine medical inspection of children between the ages of 3 and 5 years is responsible to a considerable extent for the proportionately smaller number of pre-school children to school children referred to the orthopædic clinic. Many of the postural defects found in children attending school originate during pre-school life, but are not detected until they are submitted to inspection in school.

DETAILS OF WORK OF THE HEALTH VISITORS DURING 1934

	-						
Matern	ITY AN	d Child	WELF	ARE.			
Visits to newly born infants		1,047					
Re-visits—1st year		5,343					
2nd ,,		2,896					
0.1		2,568					
4th ,,		2,388					
5th ,,		1,725		•••	•••		15,967
Visits to:—		,					,
Ophthalmia Neonatorum (6	cases)				•••		31
Diarrhœa (2 cases)							7
Measles cases							41
Whooping Cough (128 cases)							155
Infantile deaths							55
Still-births							53
Puerperal Fever and Pyrexia							5
Midwives							65
Ante-Natal cases (re admissi							667
Post-Natal cases		,		,			1,188
Infant Life Protection cases							56
Number of Sessions at the Infa	ant We	lfare Cer	ntres				250
Number of Attendances at the							300
	_						
	Tube	RCULOSI	s.				
Number of Sessions held at the	ho Die	noncary	(Day 6	207 · F	vonina	40\	346
Visits to Tuberculous cases:—	ile Dis	pensary	(Day 2	5:77 , E	vennig	, 40)	040
Notification under Tuberculo	ocic Re	gulation	c			115	
D D1		_		•••	•••	3,306	
For Dispensary purposes	•••		•••	•••	••• •	0,000	3,421
Patients' Attendances at Dispe	noort	(Tuboro	ulogic (955 . 6	thor 9	117\	4,372
ratients Attendances at Dispe	ensai y	(Tuberc	u10515, 2	., <i></i>	iller, 2	,111)	4,014
	_						
		IEDICAL					
Number of days on which the			-		•••		308
Number of attendances at Clin					•••		48,778
Number of visits paid to School	of Chile				• • •	•••	5,499
		` '	at scho				4,141
Special visits to Schools for Cl		ess Inspe	ction	•••	•••	•••	136
Number of children examined	•••		•••	•••	•••	•••	44,621
	-						
I	UBLIC	ASSISTA	NCE.				
Visits to Boarded-out Children	,	***	,.,	,.,	,		202

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REGISTRAR GENERAL'S SHORT LIST.

CLASSIFICATION OF CAUSES OF DEATH AT DIFFERENT PERIODS OF LIFE IN THE COUNTY BOROUGH OF BURNLEY DURING 1934.

	Causes of Death.	Sex.	All Ages.	0-	1—	2—	5—	15—	25—	35—	45—	55—	65—	75
ALL	. Causes	M	633 640	49	8	8	20 12	23	18 37	30	71 68	141 108	168 158	97 148
1	· · ·	М	1	-	_	-	-	-		-	1	_	_	_
		F	-	-	-	-	-		1-					-
2	Measles	$\frac{M}{F}$		_				_	_	_		_		_
3	Scarlet Fever	: M	3	-	-	-	3	_	-		_	_	-	-
4	Whooping Cough	$\frac{F}{M}$	1 3	1		1								_
		F	2		1	1		i	0	!		1 _		i
5	Diphtheria	М	12	_	-	3	9		-	-	_	-	_	_
		$+$ \mathbf{F}	6		-	2	4	<u> </u>	-		-		-	-
6	Influenza	M	2		i —	-			-	-		1	1	
		F	8		-	-			1	1	 	<u> </u>	3	3
7	Encephalitis Lethargica	M	2	-	_		1	—	<u> </u>		1-	1	-	-
		F	3	-		-	<u> </u>		-	1	-	1	1	
8	Cerebro-spinal Fever	M	3	1	-	_		2	-	_	-	_	-	-
		F	1	-		_		1						ļ —
9	Tuberculosis of Respiratory	M	28		-	_	1	2	4	6	7	6	2	ļ —
	System		26		_			7	8	7	3		1	_
10	Other Tuberculous Diseases .	$\frac{M}{F}$	9 7	1		1	1	4 2	$\frac{2}{1}$		-	2		
11	Syphilis	M	9	_	-		_		1	1	4	3		
	•	F	1	ı		_	II—	_	V		-	_	_	
12	General Paralysis of the	M	3	-		_			-	_	2	1	,	_
	Insane, Tabes Dorsalis .	. F		_		_	_		-		_			
13	Cancer, Malignant Disease .	M	76	-	ļ. —	_				2	14	23	25	12
	, and the second se	F	95	-	1 —	_	-		1	5	20	24	30	15
14	Diabetes	. М	8				1		1	_	1	1	4	
		F	14	_		_	_/				3	2	7	2
15	Cerebral Hæmorrhage, etc	M	21						1			6	11	3
2.0		F	37		_					2	7	5	15	8
16	Heart Disease	М	177			_	_ \	1	1	4	12	49	66	44
		F	188	_	_	1	1	1	3	8	10	40	60	64
17	Aneurysm		1		_	_	-	_	_	_	1	_		-
		F			-	-		-	-	-		_		
18	Other Circulatory Diseases	М	37		-		-	_	_	_	3	8	21	5
		F	21			_	_	-	_	-	2	5	9	5
		1												

Appendix 1.

Causes of Death at Different Periods of Life in the County Borough of Burnley.—(Continued).

Causes of Death.	Sex.	All Ages.	0	1	2—	5	15	25	35—	15	.55	65	75
Causes of Death.		Ages.		1		J—	13—	20-		4.0		00-	75-
Bronchitis	М	24	2				2		1	1	3	7	8
Bronchicis	F	14	1							_)]	5	7
Pneumonia (all forms)	M	29	3	1		1	3	1	4	8	3	4	i
,	F	20	3	2	2	2	1	1	3	3		2	1
Other Respiratory Diseases	M	1	-	_		_	_	—	1		<u> </u>	-	l.—
	F	5	1			_		_	-	1	1	1	1
Peptic Ulcer	M	6				-	-	-	4	1	-	1	1 -
	F	2			-1	—	-1	-	_	1	-	-	1
Diarrhoea, etc	M	5	3			-		_	-	-	1	-	1
A 1: -:4:	F M	6	3			_		2	-	$\frac{}{2}$		1	II-
Appendicitis	F	5 4				1 1	1			1	2	_	II -
Cirrhosis of Liver	M	3										2	1
Chillosis of Diver	F	1		_	_ '				_	_	1	اتاا	_
Other Diseases of Liver, etc.	M	3			_	_		_		1	1	1	_
	F	13			_		/	_		1	4	5	3
Other Digestive Diseases	M	12	3				1	_		1	2	1	4
	F	18	1		1	1	1	-	1	3	6	4	
Acute and Chronic Nephritis	M	13		- !	—	_		-	1	2	2	5	3
	F	20	_		1	_		2	2	3	5	1	6
Puerperal Sepsis	17	4		-	_	_	1	2	1	-	-	_	-
Other Puerperal Causes	F	13	_	_	_	_	3	7	3		-	-	-
Congenital Debility,													
Premature Birth,	M	31	31	_	_		_	_					_
Malformations, etc	F	16	16	-1	_		-	_	_	_	1-1		-
Senility	M	6		_	_		_		_	-		-	6
	F	22	-	·	_		-	_			-	2	20
Suicide	M	12	-		_	_	I-V	2		3	6	1	1 —
	17	7		-	_	_	-	1	1	2	1	2	
Other Violence	M	23	1	2	1	2	2	1	3	2	4	2	3
	F	19	2	_	1	2	1	1	2	_	2	3	5
Other Defined Diseases	M	65	3	3	-1	1	6	4	3	5	16	14	6
Course III defined on	F	46		2	_	_	2	7	4	8	10	6	7
Causes Ill-defined, or Unknown	M F	_											
Unknown	Г												

TABLE 2.

						1	F.		<u></u>		
	Total.	Males	Females.	Under 1	1-2 M F	2–5	5-15 M F	15-25 M F	25-45 M F	45-65 M F	65-'
22.1			<u> </u>				1		E.		
Males Females	1274	634	640	$\begin{array}{c} 49 \\ 29 \\ \hline \end{array}$	8 6	7 11	21	23	48 79	211	169 1
Infectious and Parasitic Diseases:— Typhoid Fever	1 4 5 18 10 1 7 1 5 2 1 1 5 4 8 3 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 3 3 3 12 2 2 2 2 2 2 2 2 2 2 2 2 2 1 1 1 9 9	$ \begin{array}{c cccc} & 1 & 2 & 6 & 8 & 8 & 1 & 4 & 4 & 4 & 4 & 4 & 4 & 4 & 4 & 4$	1	2 1 	1 - 1 2 2 	3			1	2
Purulent Infection Septicæmia Cancer and Other Tumours:—	1	1	_			1 -					Ī
Cancer of the Buccal Cavity and Pharynx	16 1 14 9 1 5 6 3	9 43 12 — — 9 1 1 2 2	3 52 6 16 1 14 — 4 4 4 1	 					1 - 1 2 - 2 - 2 1 1 1 1	2 1 22 20 6 3 - 10 8 5 - 2 2 3 1 1	6 14 1 4 1 1
of Endocrine Glands and Other General Diseases:— Rheumatic Fever		3	1					2 -		1 1	-

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TABLE 2—Continued.

		1		1		_	_							i				
	al.	es	Females.	Un	der I	1-	-2	2-	-5	5-	-15	15-	-25	25-	-45	45	-65	65–7
	Total.	Males	Fen	М	F	M	F	M	F	M	F	M	F	M	F	M	F	M
Chania Phone-tim				1				P							V			
Chronic Rheumatism, Osteo-Arthritis	6	2	4	_	_	_	_	_	_	l _	_	_	_		-	\ -	1	2
Diabetes	20	8	12	-	-	-	-)	-	-	1	-	-	-	1	-3	2	.1	4
Diseases of the Thyroid and Parathyroid Glands	1	_	1	_		_	-1	_	_	_	_	_	_	_	1	_	_	
Diseases of the Thymus	2	2	_	1	- /	-	-	-	-	1	-	-	-	-	- }	-	-	
Other General Diseases	1	_	1	-	-	-	-1	-		-	_	-	-	-		-	1	Г
Diseases of the Blood and Blood-	1	1																
Forming Organs:— Hæmorrhagic Conditions	1	1		1		_	_	_	_	_	_	_	_	_	_ /			_
Anæmia, Chlorosis	13	6	7			_	-1	-	-	_	-	-	-1	1	1	4	6	-
Leukæmia, Aleukæmia	1	-	1	-	-	-	-	-	-	-	-	-	1			1-	-) <u> </u>
Diseases of the Nervous System and														(
Sense Organs:—	2	1	1										,					
Encephalitis Meningitis			$\frac{1}{3}$		_	_	3	_	_	-	_	1	_	3		_		
Other Diseases of the Spinal Cord	3	1	2	-	-	_	-	-	-	-	-	-		-	-1	1	1	-
Cerebral Hæmorrhage, Apoplexy, etc	58	22	36	_		_		_		_	_}	L	_	1	2	6	11	11 1
General Paralysis of the Insane	3	3	_	_		_	_	_	_	_	_	-	_	_	-	3	-	_ `
Other Forms of Insanity Epilepsy	1		1	-	-1	-	-	-		-	-	1	-	-	-1	-	1	(-
Infantile Convulsions (Under 5	8	5	3	_	-	1	-	-	_	-		1	_	-	П	3	1	_
years of age)	4	4	-	4	_	_	-	-	-	-	-	-	-/	-	-1	1-	_	-
Other Diseases of the Nervous System	8	6	2					_	_	_		_			1	4		2
Diseases of the Ear and of the		0	1									i -			-			_
Mastoid Sinus	3	2	1	-	-	1	-1	1	-	-	-	' -	H	-	-	-	l	
Diseases of the Circulatory System:																		
Aeute Endocarditis	2	1	I	-	-	-	-	1	-	-	-	_	-) -	1	H	-	-
Chronic Endocarditis, Valvular Disease	61	25	36	l _	_	_	_	_	_	_	1	. 1	1	2	6	12	17	8
Diseases of the Myocardium	259	122	137	-	-	_	-	-	1	-	-)	1	1	3	4	35	30	55/4
Diseases of the Coronary Arteries, Angina Pectoris		17	4	l _				_	_	_					_	11	3	3
Other Diseases of the Heart	23	10	13	-	-	_	-	_	_	-	_	-	- 1	1	-1	1	1	1
Arterio-Sclerosis	62	40	22 2	-	-	-	-	-	-	-	-	-	- 8		-)	8	6	$\frac{20}{1}$
Gangrene Other Diseases of the Arteries		1		_		_	_		_	_	_	_	_	_	=	1	_	
Diseases of the Veins, (Varix,	1																	
Hæmorrhoids, Phlebitis, etc.) Abnormalities of Blood-Pressure	1 1	1	1	_				_	_	_	_	_	_	_		1	_	_ :
	_																	
Diseases of the Respiratory System:	3		3		1					,			_				٠,	
Diseases of the Larynx Bronchitis	40	25	15	1	1	-			_	_	_	2	_	1		4	$\frac{1}{2}$	8
Bronchits Broncho-Pneumonia Lobar-Pneumonia	14	7	7	2	4	l	-		- 1	1	$\frac{-}{2}$	3	1		1 3	8	- 3	1 :
Lobar-Pneumonia Pneumonia (Not Otherwise	29	17	12	-	-		1	-	1	_	2	3	-	4	3	8	.3	1
Defined)	9	8	1	1	-1	_		-	1	_	-	_	-	1	-4	3	-1	2 -

Section Sect															_				
Chronic Rheumatism, Osteo-Arthritis Osteo-Ar	nd er		Janeshouse	Stoneyholme	st. Peter's	st. Paul's	Fulledge	Burnley Wd.	Healey	Frinity	Whittlefield	Sannow	Cowerhouse	Munic. Hos.	P.Bk.Instn.	Vict'ria Hos	B'kHallHs	'Sanatorium	
Parathyroid Glands Diseases of the Thymus Other General Diseases Diseases of the Thymus Other Diseases Other Diseases	3	2	-	-	1	-	_	_		_	1	1	1	_			-	-	Osteo-Arthritis
Forming Organs:— Hamorrhagic Conditions Hamorrhagic Conditions Hamorrhagic Conditions Anamia, Chlorosis Leukæmia, Aleukæmia Leukæmia, Aleukæmia Al	- - -			 - -		- - -	_ _ _	- 1	_ _ _		_ _ _			- - -			-, -		Parathyroid Glands Diseases of the Thymus
Sense Organs:— Encephalitis Meningitis Other Diseases of the Spinal Cord Cerebral Hæmorrhage, Apoplexy, etc. General Paralysis of the Insane Other Forms of Insanity Epilepsy Infantile Convulsions (Under 5 years of age) Other Diseases of the Nervous System Diseases of the Ear and of the Mastoid Sinus Diseases of the Ear and of the Mastoid Sinus Diseases of the Circulatory System:— Acute Endocarditis, Valvular Diseases Other Diseases of the Myocardium Diseases of the Organization Other Diseases of the Nervous System Diseases of the Circulatory System:— Acute Endocarditis, Valvular Diseases Other Diseases of the Myocardium Diseases of the Coronary Arteries, Angina Pectoris I T 3 2 6 9 2 2 3 4 4 9 15 8 I	1 1 1	- 3 -			_ 1 _	_ _ _ _	3 -		- 2 -	 - -	 1 _	- 2 -	1 -	- 2 -	_ 1 _	- 2 -	_ 1 -		Forming Organs:— Hæmorrhagic Conditions Anæmia, Chlorosis
8	1.1.1	_ 1 _	_ 1 _	-	- 1 -				- - 1			1	1 1 -			1		-1	Sense Organs:— Encephalitis Meningitis Other Diseases of the Spinal Cord
1	_	8	5 - - -	-	_	-	_	-		_	1	_	3	_	_	2		-	Apoplexy, etc. General Paralysis of the Insane Other Forms of Insanity Epilepsy
Color	1		-		1 -	2		2	-	1		2	1		2	-	2	-	years of age) Other Diseases of the Nervous System
7 12 2 7 3 1 7 2 8 6 3 6 4 8 2 1 52 30 21 17 30 23 21 18 13 22 19 22 23 75 32 6 53 1 - 2 1 3 3 2 1 2 3 2 - 1 2 55 11 3 1 - 1 1 - 3 1 - - 2 - 1 2 - 55 11 7 3 2 6 9 2 2 3 4 4 9 15 8 - - 6 7 1 3 3 1 2 6 2 5 3 1 6 1 - - - - 6 7 1 3 3 1 2 6 2 5 3 1 6 1 - 1 - 6 7 1 3 3 1 2 6 2 5 3 1 6 1 - 1 - 6 7 1 3 3 1 2 6 2 5 3 1 6 1 - 1 - 6 7 1 3 3 1 2 6 2 5 3 1 6 1 - 1 - 7 8 7 8 9 1 9 9 8 9 9 9 9 9 9 9 9 9 9	_ '	1	-	-	1	_	-	_	_	1	-	_	1			1		_	Mastoid Sinus Diseases of the Circulatory System:—
- 3 1 - 2 - 1 3 3 2 1 1 - 2 3 2 - 1 2 3 2 - 1 2 - 5 11 3 1 - 1 1 - 3 3 1 - 2 2 3 4 4 9 9 15 8 5 11 7 3 2 6 9 2 2 2 3 4 4 9 9 15 8				7			7							8				-	Chronic Endocarditis, Valvular Disease Diseases of the Myocardium
	5	11	3 7		2		$\frac{1}{9}$	2	3 2	1 3	- 4	- 4	$\frac{2}{9}$	-		2	_	-	Angina Pectoris Other Diseases of the Heart Arterio-Sclerosis
$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	- 1 -			_	_	-	-	- - -	-	_,	_	_	1 -		-	1 -	_	_	Diseases of the Veins, (Varix, Hæmorrhoids, Phlebitis, etc.)
		1	1	3 -	3	$\frac{1}{3}$	- 2 2 1	2	1			1	_	2					Diseases of the Larynx Bronchitis Broncho-Pneumonia Lobar-Pneumonia
	- 1	2	_	1	1		1	_	1	1	-	2	-10	4	-1	_	1	_	

TABLE 2—Continued.

				_						_						1			_
			es.		nder	1-	-2	2-	-5	5-	-15	15-	-25	25	-45	45	-65	65-	-75
	al.	les	Females.		1														
	Total.	Males	Fer	М	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
Pleurisy	1	1		_				_						1					
Congestion and Hæmorrhagic																			
Infarct of Lung, etc	4	2	2	-	-	-		-	-	-		-		-		-	2	1	-
Diseases of the Digestive System:—			1																
Diseases of the Buccal Cavity,			1	,															
Pharynx, etc Ulcer of the Stomach or	3	1	2	1		-		-	1	-		-	5	-		-	1	-	-
To 1 - 1 - 1 - 1	7	5	2											9		1	1	1	
Other Diseases of the Stomach	2	1		1				_		_				9	1	1	1	1	
Diarrhœa and Enteritis		$\frac{1}{2}$	5	$\frac{1}{2}$	2			_		_					$\frac{1}{2}$				1
Appendicitis	9	5	4	-	-	-		-		1	2	-	l	-	_	4	1	-	_
Hernia, Intestinal Obstruction	18	6	12	-	1	-	-	-		-	-	1		-	2	3	6		2
Cirrhosis of the Liver	3	3		-	-		-	-	-	-	-	-	-	1	-	-	-	2	-
Other Diseases of the Liver	l	1		-	-	15	-	-	-	=	1	15	1	1 -	-	1	-	[5]	-
Biliary Calculi Other Diseases of the Gall-Bladder	5	1	1 4										5	-		1	2		2
and Ducts	5	1	4															1	.,
Diseases of the Pancreas	l		1	-	-	-		-		-		1	-	-		-	1	-	-
Non Vonescal Disasses of the G																			
Non-Venereal Diseases of the Genito-																			
Urinary System and Annexa: Acute Nephritis	4	1	3						1					1	2				
Chronic Nephritis		$\begin{vmatrix} 1 \\ 13 \end{vmatrix}$	19						1					_	4	5	10	6	1
Nephritis, not stated to be Acute			10														- 0		
or Chronic	3	1	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Other Diseases of the Kidney and																			
Annexa	2	2	_	-	-	-	-	-	-	-		-	-	1	-	-	-	-	-
Diseases of the Bladder	2	2		-				-	-	E	-	-	[-]	[5]	-	1	-	-	
Diseases of the Urethra, Urinary Abscesses, etc	2	2														.)			
Diseases of the Prostate	5	5		1 _										_		3		3	
Diseases of the Male Genital	"	9																9	
Organs	1	1		_			-)	1	_					_		_			_
Diseases of the Female Genital																			
Organs	4		4	-	-		-9	-	-	1		÷		-	3	-	1		-
Diseases of Pregnancy, Childbirth and																			
the Puerperal State:																			
Post-Abortive Sepsis	1		l	-	-	-	-	-	-	-	-	-	-	-	1	-	-)		-
Abortion, not Returned as Septic	2		2	-	- 1		-	-	-	1	-	1	-	=	2	-	-	-	-
Ectopic Gestation	1	-	1	-	-				-			1-	-		1	-	-	-	-
Puerperal Albuminuria and	4		4	-					-		-	-	1		3			-	
Puerperal Albuminuria, and Convulsions	6		6										.,		1				
Other Accidents of Childbirth	3		3		-				-1	E	-	-	ī	=	2	-			-
									1										
Diseases of the Skin and Cellular Tissue:—																			
Carbuncle, Boil	2	2													_ }			1	_
Cellulitis, Acute Abscess	$\frac{1}{2}$	$\frac{1}{2}$		_	_		_	-			_			-	-	_	-1	i	_
Other Diseases of the Skin and																			
its Annexa	1	1	-	-	-	1	- 1	-	- 1	-	- 1	-	- 1	-	- 1	_	- 1	-	-

Second S		ew's	ase	olme	S	S		Wd.			pla		nse	Hos.	ıstn.	Hos	Hs	ium	
1	d er	Andr	eshor	eyhc	Peter's	Paul'	edge		ley	ity	ttlefi	now	erho	nic.	3k.Ir	t'ria	Hall	nator	
Pleurisy Congestion and Hæmorrhagic Infarct of Lung, etc. Diseases of the Digestive System:— Diseases of the Bugestive System:— Diseases of the Stomach or Diseases of the Stomach or Diseases of the Stomach Other Diseases of the Stomach Diseases of the Signary Calculus Other Diseases of the Liver Diseases of the Liver Diseases of the Call-Bladder Diseases of the Gall-Bladder Diseases of the Pancreas Diseases of the Pancreas Diseases of the Pancreas Diseases of the Bladder Diseases of the Bladder Diseases of the Bladder Diseases of the Williamy System and Annexa:— Annexa Diseases of the Male Genital Diseases of the Male Genital Diseases of the Bladder Diseases of the Male Genital Diseases of the Bugestial Diseases	F	St. 1	Dan	Stor		St.	Full	Bur	Неа	Trin	Whi	Gan	Low	*Mu	*P.I	*Vic	*B'1	*Saı	
Congestion and Hæmorrhagic Infarct of Lung, etc. 1		_	_	-		_				1_	_	_			_	1	_	_	Pleurisy
Diseases of the Digestive System:— Diseases of the Buccal Cavity, Diseases of the Buccal Cavity, Pharynx, etc. Ulcer of the Stomach or Duodenum Other Diseases of the Borana Mannexa Diseases of the Buccal Cavity, Pharynx, etc. Ulcer of the Stomach or Duodenum Other Diseases of the Stomach Diseases of the Iver Other Diseases of the Liver Other Diseases of the Liver Other Diseases of the Liver Other Diseases of the Call-Bladder and Duct Other Diseases of the Bladder Diseases of the Pancreas Non-Veneral Diseases of the Pancreas Non-Veneral Diseases of the Stomach Other Diseases Other	-	2	_	_		_				1	_	1		_	_		_	_	
Diseases of the Buccal Cavity, Pharyn, etc. Ulcer of the Stomach or Duodenum Other Diseases of the Etcomach or Duodenum Other Diseases of the Stomach Other Diseases of the Stomach Diarrhexa and Entertitis Appendicitis Hernia, Intestinal Obstruction Cirrhosis of the Liver Other Diseases of the Call-Bladder and Ducts Other Diseases of the Call-Bladder Acute Other Diseases of the Call-Bladder Acute Other Diseases of the Call-Bladder Other Diseases of the Ridney and Annexa: Acute Acute Other Diseases of the Bladder Other Diseases Other																			Ç.
1																			Diseases of the Buccal Cavity,
-		,	_	_	-	-			,	Γ.	1			-		_	Ī	-	Ulcer of the Stomach or
1		-	_	_		1 -	_	1 -	-			1	_	-	_	-		_	Other Diseases of the Stomach
1			-	-			-	-			1		-	2 3		- 5	2	-1	
Cher Diseases of the Liver Bilary Calculi Other Diseases of the Gall-Bladder and Ducts Diseases of the Pancreas Diseases Disea	1		1		1	-	3	1			_	2	-	4	-		-	_	Hernia, Intestinal Obstruction
	-	-	-	-	1	1	1			J-3	-		-		-	-	-	-	Cirrhosis of the Liver
Converse of the Gall-Bladder Converse of the Gall-Bladder Converse of the Property Converse of the Gall-Bladder Convers		_	_	_			$\frac{-}{2}$				1				1	1 -		_	
											١,								Other Diseases of the Gall-Bladder
Non-Venereal Diseases of the Genito-Urinary System and Annexa:— Acute Nephritis Chronic Nephritis Chronic Nephritis Chronic Nephritis Chronic Nephritis Chronic Nephritis Chronic Nephritis Nephritis, not stated to be Acute Or Chronic Nephritis Other Diseases of the Kidney and Annexa Diseases of the Bladder Diseases of the Urinary Abscesses, etc. Diseases of the Urethra, Urinary Abscesses, etc. Diseases of the Prostate Diseases of the Prostate Diseases of the Prostate Diseases of the Prostate Diseases of the Male Genital Organs Diseases of the Female Genital Organs Diseases of the Female Genital Organs Diseases of the Stir Diseases of the Stir Diseases of the Prostate Diseases of the Prostate Diseases of the Prostate Diseases of the Stir Diseases of the Prostate Diseases of the Stir Diseases	2	_	1			_				-			- 1	-					
Virinary System and Annexa:—													1	1				П	Discases of the Lahereas
1																			
Nephritis, not stated to be Acute or Chronic Other Diseases of the Kidney and Annexa Diseases of the Bladder Diseases of the Urethra, Urinary Abscesses, etc. Diseases of the Prostate Diseases of the Prostate Diseases of the Male Genital Organs	- 1	-	-1		- 3	_	_	1	-		1			1	_		_	_	
2	4	2	1	3	4	1	3	2	5	3	1	3	4	12	-	4	-	-1,	Chronic Nephritis
Other Diseases of the Kidney and Annexa Diseases of the Urethra, Urinary Abscesses, etc. Diseases of the Prostate Diseases of the Prostate Diseases of the Male Genital Organs Diseases of the Female Genital Organs Diseases of the Female Genital Organs Diseases of the Werperal State:— Post-Abortive Sepsis Abortion, not Returned as Septic Ectopic Gestation Puerperal Albuminuria, and Convulsions Other Accidents of Childbirth Diseases of the Kidney and Annexa Diseases of the Urethra, Urinary Abscesses, etc. Diseases of the Prostate Diseases of the Female Genital Organs Diseases of Pregnancy, Childbirth and the Puerperal State:— Post-Abortive Sepsis Puerperal Albuminuria, and Convulsions Other Accidents of Childbirth Diseases of the Skin and Cellular Tissue:— Carbuncle, Boil Cellulitis, Acute Abscess Other Diseases of the Skin and	2	_		_		П	_		->	_		1	_		_	_	_	_	
Diseases of the Bladder Diseases of the Urethra, Urinary Abscesses, etc.																			Other Diseases of the Kidney and
Diseases of the Urethra, Urinary Abscesses, etc. Diseases of the Prostate Diseases of the Male Genital Organs Diseases of the Female Genital Organs Diseases of the Female Genital Organs Diseases of the Female Genital Organs Diseases of the Puerperal State:		- : 1	-		-		1	(7)] - [-		-	-	-	Ē	-1	-	- 1	
Diseases of the Prostate Diseases of the Prostate Diseases of the Male Genital Organs Diseases of the Female Genital Organs Diseases of the Female Genital Organs Diseases of the Female Genital Organs Diseases of the Prostate:—		•						1											
Diseases of the Male Genital Organs Diseases of the Female Genital Organs Diseases of Pregnancy, Childbirth and the Puerperal State:— Post-Abortive Sepsis Abortion, not Returned as Septic Ectopic Gestation Puerperal Sepsis Puerperal Albuminuria, and Convulsions Other Accidents of Childbirth Diseases of the Skin and Cellular Tissue:— Carbuncle, Boil Cellulitis, Acute Abscess Other Diseases of the Skin and Cellulitis, Acute Abscess Other Diseases of the Skin and Cellulitis, Acute Abscess Other Diseases of the Skin and Cellulitis, Acute Abscess Other Diseases of the Skin and Cellulitis, Acute Abscess Other Diseases of the Skin and Cellulitis, Acute Abscess Other Diseases of the Skin and Cellulitis, Acute Abscess Other Diseases of the Skin and Cellulitis, Acute Abscess Other Diseases of the Skin and Cellulitis, Acute Abscess Other Diseases of the Skin and Cellulitis, Acute Abscess Other Diseases Ot		-	-	-	-				-	-		-	-	-	_		-	-	
1 1 1 1 3 Organs Diseases of the Female Genital Organs Diseases of Pregnancy, Childbirth and the Puerperal State: Post-Abortive Sepsis Abortion, not Returned as Septic Ectopic Gestation Puerperal Sepsis Puerperal Albuminuria, and Convulsions Other Accidents of Childbirth Diseases of the Skin and Cellular Tissue: Carbuncle, Boil Cellulitis, Acute Abscess Other Diseases of the Skin and		_					1		1-1	1	2	1		1	_	2	-	_	
1 1 1 3 Organs Diseases of Pregnancy, Childbirth and the Puerperal State: Post-Abortive Sepsis	- 1	-	-	1	-	-	-	-		-	-	_	-	1	-	_	-	-	Organs
Diseases of Pregnancy, Childbirth and the Puerperal State:— Post-Abortive Sepsis Abortion, not Returned as Septic Ectopic Gestation Puerperal Slates:— Post-Abortive Sepsis Abortion, not Returned as Septic Ectopic Gestation Puerperal Slates:— Post-Abortive Sepsis Abortion, not Returned as Septic Ectopic Gestation Puerperal Albuminuria, and Convulsions Other Accidents of Childbirth Diseases of the Skin and Cellular Tissue:— Carbuncle, Boil Cellulitis, Acute Abscess Other Diseases of the Skin and	_	_			1	1		ш	V_	1				3		_			
					1	•				•			1						
1 1 1 1 1																'			Diseases of Pregnancy, Childbirth and
	_	-	-1	_	_	-	_	_	-	1		1-8	-	1	_	_	_	-	
- 1 2 1 1 1 1 1 2 1 2	-	-		-	-	-	1		- (-	-				-	1	-	ы	Abortion, not Returned as Septic
- 1 2 1 1 1 1 4 1 Convulsions - 1 1 1 - 1 - 1 - 1		_			1				- ,	_				- •	_	1	_		
- 1 2 - - 1 1 1 - - - - 1 - -					1				-				1	-			_		Puerperal Albuminuria, and
- 1 1	- ;	1	2	-	-	1	1	1	-	-		-	-	1	-	-	4	1	Convulsions
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- 1 1 1																			
2 1 Cellulitis, Acute Abscess Other Diseases of the Skin and	_	1	_	_		1	_						_	_ 3	_	1	_		
	-	-	-	-		-	-		-	2		-	-	-	-	ì	-	-	Cellulitis, Acute Abscess
its Amnexa	_											1		1					
																			Tto Annexa

TABLE 2-Continued.

												-						
	Total.	Males	Females.		ider 1	1-	-2	2-	-5	5	15	15-	-25	25-	45	45-	-65	65–7
	Tot	Ma	Fer	М	17	M	F	M	F	M	\mathbf{F}	M	F	M	F	M	F	M F
Diseases of the Bones and Organs of Locomotion: Diseases of the Joints and Other Organs of Locomotion			1															
Organs of Locomotion	1		1					ı –									1	
Congenital Malformations:— Congenital Malformations	7	2	5	2	5	_	_	-	-	-	-	_	-	-	-	-	-	
Diseases of Early Infancy:— Congenital Debility	3	3		3	_	-	_	_	_		_	-	_	_	-	_	-	
Premature Birth Injury at Birth Other Diseases Peculiar to Early	27 3	18	9	18 3	9	_	_	-	-	-	-	-	-	-	-	-	-	
Infancy	8	5	3	5	3	_	_	-	-	-	-	-	_	-	-	-	-	
Old Age: — Old Age	33	7	26	_	_	_	_	_	_	_	_	_	_	_		_	_	_ :
Deaths from Violence:—																		
Suicide by Poisonous Gas Suicide by Hanging or Strangu-	9	7	2	-		-	-	-	-	-	-	-		1	-	5	2	1 -
lation Suicide by Drowning	1 5 1	1 3 1	$\frac{1}{2}$	-	-	_	- -	_	-	-	_	_	_	-	1	3	_	- 1
Snicide by Fire-Arms Suicide by Cutting or Piercing Instruments		1	2	_	_	_	_		_	_	_	_	_	_		1	1	_
Suicide by other Means Food Poisoning	1	<u> </u>	- I	-	-	_	_	_	-	-	_	_	_	-	1 -	ī	_	
Accidental Burns (Conflagration excepted) Accidental Mechanical Suffocation	7	2	5	-	-	2	-	_	1	-	1	-	1	_	1	-	1	
Accidental Mechanical Surficiation Accidental Drowning Accidental Injury by Fall,		2	1	-	-	-	_	-	_	$\frac{1}{2}$	I	-	-	-	-	-	-	
Crushing etc	22	14	8	-		-	-	1	-	-	-	2	-	3	2	5	1	2 3
Ill-Defined Diseases:— Cause of Death Unstated or Ill- Defined	ı	1	_	_	_	_		-	_	_	_	_		_	_	I	_	
		634		49		8		7		21		23		48		211		169
Totals	1274		640		29		6		11		12		21		79		177	

^{*} The deaths in Institutions are also included in

			1 4)	1	1			4							10			
	ew'	nse	Stoneyholme	r's	S		Burnley Wd			ield		nse	*Munic. Hos	*P.Bk.Instn	*Vict'ria Hos	Hs	*Sanatorium	
d er	Andrew'	Daneshouse	yho	Peter's	Paul's	Fulledge	ley	- X	. A:	Whittlefield	011.	Lowerhouse	ic.]	k. Ir	'ria	B'kHallHs	ttor	
		nes	one		Д.	llec	ırn]	Healey	Trinity	hitt	Gannow	w.e.	lun	B.	ict	7,15,1	ana	
F	St.	Da	St	St.	St.	표	Bu	H	17		3	13	*	*	*	* m	*	
							[Diseases of the Bones and Organs of
	ш																	Locomotion:—
_	_	1			_	_	_	_	_	_	_			U_	1	-	_	Diseases of the Joints and Other Organs of Locomotion
			- 5															
_]	_	_	_	_	_	1	2	ı	_		2	1	1	-	_	_	_	Congenital Malformations:— Congenital Malformations
																		Diseases of Early Infancy:—
_	_		1	1	1	_		_		_	_		_	_	_	_	_	Congenital Debility
-		1 1 3 5 5 1 1 1 1 3 5 1 1 1 - 1 15 - Premat														Premature Birth		
-	1	6	1 1 Injury Other														Injury at Birth Other Diseases Peculiar to Early	
_	2	ы	-	1		_	1	_	1	_	_	3	1	-	_	3	-	Infancy
																		Old Age:—
4 1	4	5	3		-	4	1	3	-	1	-	2	_	-	-	-	-	Old Age
		j																Deaths from Violence:—
-	1	-)	1	-		l	1	_	1	1	1	2	-	_	_	-	_	Suicide by Poisonous Gas
	3						L, I											Suicide by Hanging or Strangu- lation
_	$\frac{-}{2}$	_	_	_	1	_	1		1	_	_	1	_	_	_		_	Suicide by Drowning
- [1	- 1	-	_	<u> </u>	-	_		-	-	-	_		_	-	-	-	Suicide by Fire-Arms
	2											,		,				Suicide by Cutting or Piercing Instruments
_ '	ī		_	-		_		_	_	_	_	1	1	1 -	_		_	Suicide by other Means
-	-	-	9-	1	_	-	-		-	-	-1	-	1	-	-	-	-	Food Poisoning
		1	-	1			2	2		1					6			Accidental Burns (Conflagration excepted)
		_		_		_	Ĺ	_	1	_		_	_	_	-			Accidental Mechanical Suffocation
-	-1	-	1	-	-	-		-		1	-	1	-	-	-	-	-	Accidental Drowning
$_2$.	5	1.	2	3	1	2	2	_	3	_	2	1	5	_	9		_	Accidental Injury by Fall, Crushing, etc.
	1																	Ū,
																		Ill-Defined Diseases:— Cause of Death Unstated or Ill-
-	-1	-	-	-	-	1	-	-	-	-		-	-	-	-	-	-	Defined
47 19	90	89	69	100	78	133	108	104	98	62	124	119	251	56	103	35	26	ş1

the Wards in which the person usually resided.

TABLE 3. VITAL STATISTICS OF WHOLE DISTRICT DURING 1934 AND PREVIOUS YEARS.

	R.G's Population		ve Birth	s. Vett	Regist	Deaths ered in istrict.	Dea	erable ths.		to the	s belongi District.	
Year	estimated to Middle of each year	Uncorrected Number	Number	Rate.	Number.	Rate	Non-residents registered in the District.	Kesidents registered i	Numb'r	Rate per	Numb'r	Rate
1924	103,400	1733	1701	16.4	1651	16.0	171	48	215	126	1528	14.8
1925	102,300	1663	1639	16.0	1648	16.1	209	71	178	109	1510	14.8
1926	99,600	1607	1600	16.1	1449	14.5	199	62	138	86	1312	13.2
1927	99,270	1509	1507	15.2	1708	17.1	232	53	166	110	1529	15.4
1928	100,700	1520	1501	15.0	1513	15.1	223	55	119	79	1345	13.3
1929	100,200	1425	1403	14.0	1690	16.8	240	57	147	104	1507	15.0
1930	100,200	1336	1338	13.35	1446	14.4	235	63	101	75	1274	12.7
1931	99,180	1333	1292	13.03	1616	16.3	268	63	111	86	1411	14.2
1932	97,210	1184	1169	12.0	1447	14.9	253	70	101	86	1264	13.0
1933	95,900	1197	1165	12.15	1643	17.13	278	60	87	74.7	1425	14·66 ———
Average 10 years	99,796	1451	1431	14.3	1581	15.8	231	60	136	93.6	1410	14.10
1934	94,300	1134	1110	11.76	1507	15.98	280	47	78	70.3	1274	13.51

TABLE 4.—Distribution of the Notifiable Infectious Diseases during 1934.

			Τ	OTAL	Cas	es N	OTIFI	ED 1	N EA	сн V	VARD							
rifiable Diseases.	St. Andrew's	Danes House	Stoneyholme	St. Peter's	St. Paul's	Fulledge	Burnley Wood	Healey	Trinity	Whittlefield	Gannow	Lowerhouse	Primrose Bank Inst'n.	Municipal Hospital	Victoria Hospital	Bank Hall Hospital	Sanatorium	TOTAL
l Pox		=	-	<u> </u>	-		-		<u> </u>	<u> </u>	-	Ī		_		-	-	<u> </u>
ега	_			_	-	-	-		_	_	-		-	_	· —	-		-
theria (including embranous Croup)	30	16	17	27	20	46	29	7	10	14	46	66	_	6	9	4	_	347
ipelas	9	7	_	2	4	11	11	6	8	2	2	5	1	12	1	1	-	82
let Fever	48	16	6	17	20	46	27	40	33	12	49	32	1	5	_	1	1	354
ric Fever		_	-	_	_	-		-	_	_	-				1		_	1
nus Fever	-	-		-	-	-	-	-	_	_	-	-	_	_	: —	-	-	.—
psing Fever	-	-	-	<u> </u> –	-	—	-	-	-	-	<u> </u>		_	_	-			_
inued Fever	_	-	-		-	-	-	-	-	-	_	-	_	-	-	-	1-1	-
peral Fever	_		-	1	-	_	-	-	-	-	-	_	-	5	_	-	1	7
peral Pyrexia	1	_	_	-	-	_	-	_	_	-	-	1	_	3	-	11	-	16
ria	-	<u> </u>	-	-	-	_		-		-	-	_		_		-		_
bro-Spinal Menin-	_	_	_	-	_	1	1	_		_	_		_	2	2	-	_	6
thalmia Neonatorum		-		-			-	1	1.		1	-	_	1	-	2	-1	6
ary Pneumonia	24	10	6	14	11	19	3	8	6	4	9	13	_	11	_	1	-	139
enzal Pneumonia	1	-	1	1	_		-	-	-	-	-	3	-1	4	-	_ }	-	10
e Polio-Encephalitis	_	1		-	_		-	-		-		-	-		-	_	Ы	1
entery	-	_		-	-	-	-			-1		-	_	3	-		-	3
phalitis Lethargica	-	_		-	1	-	1	1	-	_	_	_	<u> </u>	1	1		_	5
e Poliomyelitis	1	_	-	— ,		_		-	_	_		-	_	-	1	-		2
sles	53	94	9	6	6	19	5	5	8	3	7	10	-	-1	_	-	-	225
nan Measles	-	2	-	-	-	4	3	-	-		2	-	_	-	-	-	-	11
erculosis of Lungs†	6	3	3	6	4	11	3	1	11	2	8	4	-	5	6	1	-	74
r Forms of Tubercl's	† 2	6	1	1	1	4	4	4	2	1	2	1	-	6	5	1	-	41
Totals	175	155	43	75	67	161	87	73	79	38	126	135	2	64	26	22	2	1330
17) Y 110																		

[†]Primary Notifications.

TABLE 5.

Seasonal prevalence of the Infectious Diseases notified in 1934.

					1						1		
Disease.	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total
Diphtheria and Membranous Croup	19	30	28	21	31	15	13	37	15	26	76	36	347
Erysipelas	13	8	13	7	10	5	3	6	4	5	4	4	82
Scarlet Fever	64	46	43	22	29	18	10	21	25	21	34	21	354
Enteric Fever	_	_	1	_			_	_	_	_	-	_	1
Puerperal Fever	2		_		2	_		_	2	1	I -I	-	7
Puerperal Pyrexia	3	2	5		1		1		1	1	1	1	16
Ophthalmia Neo- natorum	1	_	1	l	_		2	_	_	_	1	-	6
Primary Pneu- monia	13	10	18	17	17	17	6	8	10	8	9	6	139
Influenzal Pneumonia	1	1	3	l	2	1			1	_}	_	_	10
Acute Poliomye'tis	-	-		-		_ [_	1	-		1		2
Acute Polio- Encephalitis		-	_	_	-	1		_	_	-		_	1
Encephalitis Lethargica	_	_	l	_		<u> </u>	2		-	1	-	1	5
Cerebro-Spinal Meningitis	-	-	_	_	2	1	1	_	-	2		_	6
Measles	8	3	4	13	66	81	30	6	1	1	6	6	225
German Measles	_		1			4	1	1	2	- '	1	1	11
Tuberculosis of Lungs	6	3	9	5	3	15	5	7	5	8	3	5	74
Other forms of Tuberculosis	6	2	4	5	3	5	3	3	5	1	l	3	41
Malaria	_	_	-	_	-	1-		_	-			-	
Dysentery		1	2		-	-		-	-	-		-	3
Totals	136	106	133	92	166	163	77	90	71	75	137	84	1330

TABLE 6. Number of Notifications of Infectious Diseases, 1916-1934.

											_		-	_	-	-	_	- 12	
Disease.	1916	1917	1918	1919	1920	1921	1922	1923	1924	1925	1926	1927	1928	1929	1930	1931	1932	1933	1934
nall Pox		-	_	_		_					2	41	181	1					_
nolera	-	_		- 8	_	l —	_	-				_	_			_			
iphtheria, including																			
Membranous Croup	98	60	54	73	96	206	118	105	103	163	142	154	95	137	90	86	86	159	347
rysipelas	86	52	49	79	77	68	57	68	70	103	50	51	87	77	81	56	49	60	82
carlet Fever	179	46	32	127	176	163	478	597	76	209	143	101	144	481	242	194	178	760	354
nteric Fever	31	5	6	7	9	16	5	14	23	5	21	1	5	7	5	3	4	2	1
vphus Fever	_			_	_	_	_		I — I		_		-	_	_		-		
elapsing Fever			_		_	_	-	ш	I — I	_	_			(I	_		_		_
ontinued Fever	_) — I	-	-3	-					_			-	9		_		<u> </u>	I —
uerperal Fever	2		3	10	3	9	3	2	4	4	2	6	4	7	8	7	4	4	7
uerperal Pyrexia		}									4	12	28	12	17	17	20	34	16
erebro Spinal Meningitis				1	-	4	_		i — I		_	2	1	_		1	4	2	6
cute Poliomyelitis	2				1	2	1		3	3	_	2	_	1	2	1	1	1	2
phthalmia Neonatorum	20	13	16	22	18	29	15	13	21	11	18	11	6	7	17	15	16	10	6
cute Primary Pneumonia			1 1	82	91	78	85	94	102	150	160	172	197	253	173	271	195	208	139
cute Influenzal															1 3				1
Pneumonia				72	8	8	19	2	36	30	13	38	17	45	16	51	31	48	10
lalaria				87	42	6	1	1	2	1	1	1	1					1	_
ysentery				4	2		-	-			1	1	1	. —	—	1-1	I —	3	3
ncephalitis Lethargica				1	4	1	3	7	6	3	3	13	4	5	4	5	4	3	5
olio-Encephalitis						_	_	1	-	1		_	l —	_	-		1		1
leasles and German		1 3																	
Measles		1519				147	3423				2220	المتانية المتانية إ			2373			2367	
Tuberculosis of Lungs	135	145	124	126	110	122	155	172	143	126	120	100	131	100	112	91	115	86	74
Other Forms of Tuber-																			
culosis	100	74	56	59	56	63	78	85	92	85	68	72	60	52	55	46	57	53	41
Total	2187	1914	1657	2499	983	922	4441	1354	1295	3217	2968	1970	2367	1420	3195	1722	1103	3801	1330
											1								9

† Primary Notifications.

The compulsory notification of Infectious Disease was commenced on 24th June, 1884, under powers obtained by the Burnley Borough Improvement Act, 1883. The Diseases to which this

Act applied were Scarlatina, Small Pox, Cholera, Typhus and Typhoid Fevers and Diphtheria.

The following diseases became universally notifiable on the 30th August, 1889, by the Infectious Diseases (Notification) Act of that year:—Small Pox, Cholera, Diphtheria, Membranous Croup, Erysipelas, Scarlet Fever and the Fevers—Typhus, Typhoid, Enteric, Relapsing,

Continued and Puerperal.

Notification of Tuberculosis of the Lung commenced on 1st February, 1909, in accordance with powers obtained in the Burnley Corporation Act, 1908. This disease became generally notifiable on 1st January, 1912, by the Public Health (Tuberculosis) Regulations, 1911.

Notifications of all forms of Tuberculosis commenced on the 1st February, 1913, by the

Public Health (Tuberculosis) Regulations, 1912.

Cerebro-Spinal Meningitis and Acute Poliomyelitis became compulsorily notifiable on 1st September, 1912.

Ophthalmia Neonatorum became compulsorily notifiable on 1st April, 1914.

Measles became compulsorily notifiable on 1st January, 1916, but the Order was rescinded on the 31st December, 1919. Application was made by the Local Authority to the Ministry of Health for all cases of Measles to be notifiable. This was approved, and the Borough of Burnley Etc. (Measles and German Measles) Regulations, 1920, came into force on the 1st March of that year.

Notification of Encephalitis Lethargica and Polio-Encephalitis commenced on the 1st January,

The compulsory notification of Malaria, Dysentery, Acute Primary Pneumonia and Acute Influenzal Pneumonia came into operation on the 1st March, 1919.

The notification of Puerperal Pyrexia commenced on the 1st October, 1926.

TABLE 7-NOTIFIABLE INFECTIOUS DISEASES DURING 1934.

											ı				-
	Notifi-					Č	CASES NOTIFIED AND DEATHS.	TIFIED	AND L	EATHS					osI
Notiliani Pichache	cations	Atall				-	At	Ages_	-Years.				-		ot b
NOIPTABLE LISEASES.	Deaths.	Ages.	Under	1–2	2-3 8-3	3-4	4-5	5-10	10-15	15-20	20-35	35-45	45–65	65 and over	Total removed I noital
Small Doy	Notified	1	1		1										
	Deaths				1	1				1					<u> </u>
	Notified	1	1	1	J		i	ı	1				1	1	
	Deaths	l	i			1					I	1			
Diphtheria Carolidia Mambagana	Notified	347	1	1	6	18	23	171	83	16	25.	ना	-		
Croup)	Deaths	18		1	3		ा	6	õ						297
	Notified	82	ı	-			-	-	52	-	13	10	282	?! ?!	
spideide	Deaths	7						1		1	-		-	52	
Conside Equat	Notified	354	1	11	18	30	17	138	67	17	29	-	-	1	
Statiet revei	Deaths	4			1			က	1	1					0+240
Tunhus Haver	Notified		 				1	1					1		
Thins town	Deaths	ı					1		1						<u> </u>
Futeric Gauer	Notified	1					1	1	1			1	-		
	Deaths	1		1	1 1		1						-		 ~_
Relansing Payer	Notified		-	1	1	1									
	Deaths				ı	1		ı	1	i		!			 ^—
Continued Fever	Notified	1] 		1						1	1	
	Deaths		1	1	1		1	1							!
Puerneral Fever	Notified	7	1	I			ı			1	5	61			_
,	Deaths	4	1	1	1	1	1		1		<u>چ</u>	-			
Puerneral Porevia	Notified	16						1	1	1	12	4		1	"
	Deaths			1	1				ı						
	Notified	6		-						4	-				

													157													
- \	 				L		 	i ~	 	_	دسم		ر			<u>-</u>		00	8			<u>د</u>	E		653	900
		1	10	9		1	1		1	1	1		_	1		1	₩	ତା	ા	7	1			1	41	20
			31	16	ा				1	1			Ford	6.1			13	13	9	က	¢1	ଚୀ	1	1	89	38
1		1	22	∞	က	1	ı		1		1		_	-			6	9	10	7	1	ı	63		89	24
1	1		22	7	4	-	i		1					1	1		œ	9	6	13	9	3	œ	က	142	36
1			6	1	-	1			ı			ı			ତୀ	ı	3		4	က	က	4	1	ı	61	8
1	ı		1	1	1						1		_	-	က	ı	. 1		က			1		1	171	7
		l	22	က	1	ı	ı				1	I	1		77	1	1	١,		!	61		7		419	16
1	1	ı	67	1		١	ı				ı	1	1		43	ı	1		ļ			ı	1	1	112	8
1	1		10	_	ı	-	1	ı	1				1		50	1			1		ı	1			104	1
	П	ı	1	1	ı	1	ı			ı		I	1		31		ı	1	1		1		63	-	62	4
١	ı		#	ા	1	1							!		19	1	1	1		1	1	!	ı	1	37	3
ı	1		++	7		1			1			ı	į		10	ı					1	1	1	-	24	6
1	રા	-	139	52	10	ા	1		က	-	-	ı	ū	າດ	236	1	39	27	35	27	17	11	£2.	7	1330	169
Deaths	Notified	Deaths	Notified	Deaths	Notified	Deaths	Notified	Deaths	Notified	Deaths	Notified	Deaths	Notified	Deaths	Notified	Deaths	Notified	Deaths	Notified	Deaths	Notified	Deaths	Notified	Deaths	Notified	Deaths
	11.1	Acute Poliomyelitis		Acute Frimary Fneu-	T 0 1	Acute Innuenzal Fueu-		Malaria		Dysentery	<u> </u>	Folio-Encephantis		Encephantis Lethargica	No.	: :	J. 1010)	:	Si		Moles	ر :	losis	رسه	ب	::

TABLE 8.—Birth Rate, Death Rate, Infantile Death Rate, and Death Rate from various Infectious Diseases of some of the large towns during 1934, as shown by the Returns of the Registrar General.

						ath Rate	•	of
_	Popu-			lnfantile		Popula	ation.	
Town.	lation. Mid 1934	Birth Rate.	Death Rate.	Death Rate.	Measles.	Scarlet Fever.	Diph- theria.	Typhoid & Para-Typ'd Fever.
Birmingham	1,012,800	15.6	11.2	67	0.02	0.01	0.08	0.01
Liverpool	856,850	20.5	13.2	80	0.26	0.02	0.21	W
Manchester	754,600	15.3	12.6	69	0.13	0.02	0.11	n - 1
Sheffield*	520,950*	14.5	11.3	55	0.05	0.01	0.08	0.01
Leeds	486,250	14.8	13.0	71	0.19	0.03	0.32	-
Bristol	410,500	13.9	10.9	46	0.03	_	0.04	-
Hull	319,600	18.3	11.4	64	0.01	0.03	0.20	0.01
Bradford	293,650	13.7	13.5	62	0.05	0.03	0.15	0.01
Newcastle	287,050	16.4	12.8	84	0.28	0.08	0.08	_
Stoke	274,750	16.7	11.7	85	0.16	0.04	0.02	-
Nottingham	281,850	15.6	12.3	69	0.06	0.02	0.02	-
Leicester	241,100	14.2	11.8	53	0.06	_	0.08	
Salford	213,850	15.0	13.7	92	0.24	0.01	0.13	
Cardiff	221,050	15.8	12.4	75	0.04	0.02	0.10	
Plymouth	203,450	15.7	12.5	54	0.08	0.01	0.08	
Sunderland	186,650	20.1	12.5	82	0.16	0.10	0.06	0.02
Bolton	176,200	12.7	12.2	53	0.07	0.01	0.06	-
Swansea		16.2	11.7	62	0.02	0.01	0.05	-
Birkenhead	150,100	16.9	12.0	60	0.06	0.01	0.18	-
Derby*		14.9	11.0	57	0.09		0.06	
Middlesborough	139,550	19.7	13.2	79	0.72	0.04	0.43	-
Oldham	135,200	12.5	14.5	72	0.15	0.02	0.19	0.01
Coventry	184,700	13.8	10.1	57	0.01	0.02	0.07	0.01
Wolverhampton	140,300	16.1	11.3	57	0.01	0.03	0.10	-
Stockport	128,050	13.7	11.9	54	0.02	0.02	0.04) —
Blackburn*	119,880*	12.0	13.3	57	_	0.04	0.03	l —
Preston*	117,490*	14.2	13.7	69	0.22	0.02	0.07	-
South Shields	112,750	17.9	13.2	84	0.13	0.03	0.07	J
Huddersfield	114,500	12.6	13.5	58	0.03	0.02	0.38	
St. Helens*	108,240*	19.1	10.6	65	0.09	0.02	0.17	0.01
Walsall	105,600	18.0	11.0	69		0.01	0.02	
Blackpool*	116,550*	10.6	13.2	59	0.01	0.01	0.10	0.01
Halifax	97,050	11.8	14.0	77	0.08	0.02	0.21	-
BURNLEY	94,300	11.8	13.5	70	-	0.04	0.19	0.01
Wallasey	97,000	13.4	11.9	53	0.01		0.28	II —
Northampton	96,550	12.2	11.4	46	0.12	_	0.02	_
Rochdale	94,450	12.4	14.6	78	0.12	0.01	0.07	
Wigan	84,750	17.4	12.4	67	0.01	0.01	_	—
Warrington	80,950	17.3	11.6	74	0.16	0.06	0.49	-
Bootle	76,800	21.4	12.8	75	0.35	0.03	0.47	
Southport	79,100	10.9	13.5	47	0.11	-	0.01	
Barrow-in-Furness	64,750	13.6	13.0	98	0.08		0.25	
Bury	60,100	12.3	14.2	84	0.18	}	0.17	

^{*}Change in boundary 1st April, 1934. Rates based on adjusted populations as follows:—Sheffield, 518,525; Derby, 140,986; Blackburn, 119,848; Preston, 117,290; St. Helens, 108,005; Blackpool, 114,510.

Wards.
Twelve
the
of
Statistics
9.—Vital
TABLE

APPENDIX 1.

		1																	
	Infantile Mortality per 1,000 Births	54.5	36.6	31.3	81.1	161.8	73.4	8.89	42.1	57.5	6.92	101.4	62.5	ļ	1	ı	ı	1	70-3
PULATION	Deaths from Respiratory Diseases (excluding Tub'rcul's)	1.11	99.0	1.10	1.91	1.55	09-0	1.11	89.0	1.03	08.0	1.02	1.10		ì	ı	1	1	1.02
RATE PER 1,000 OF POPULATION	Deaths from all forms of Tub'rcul's	0.59	0.79	0.37	0.76	0.77	1.28	1.48	89.0	0.15	0.40	0.65	09-0	ı	ı	1	1	1	0.73
RATE PER	Cases of Infectious Disease	10.0	19.4	7.1	12.9	13.1	14.5	6.6	7-7	6-6	7.0	10.8	13.0	l	1		I	1.	12.4
No. of	notifiable Infectious Disease (excluding l'ub'rc')	167	146	39	89	62	146	80	89	99	35	116	130	53	ণ	15	50	÷1	1215
	Death Rate	12.4	11.8	12.1	19.1	15.1	13.2	13.3	11.8	14.4	12.4	11.5	11.9		ı	1		1	13.51
	No. of Deaths of Residents	190	68	69	100	78	133	108	104	86	62	124	119	*125	*96	103*	35*	*97	1,274
	Birth Rate	7.2	10.9	11.7	14.1	13.2	10.8	10.5	8.01	10.3	10.4	10.3	9.6	1	1	1	1	1	11.77
No. of	Burnley Births Registered in the District	110	82	64	74	89	109	85	95	87	52	138	96	63†	_1	÷1	313‡	ı	1,060
	Acreage (as given in Census 1931)	835	140	547	113	156	742	360	463	91	246	476	517	1	ı	1		1	4,686
	Enumerated ated Population Census 1931	15,370	7,535	5,470	5,249	5,162	10,059	8,102	8,797	6,796	4,986	10,762	9,970	1	1	ı	I	I	98,258
	WARDS	St Andrew's	Danes House	Stoneyholme	St. Peter's	St. Paul's	Fulledge	Burnley Wood	Healey	Trinity	Whittlefield	Gannow	Lowerhouse	Municipal Hosp.	Primrose Bank Institution	Victoria Hospital	Bank Hall Mat'rty & Ch'dns Hosp.	Sanatorium	Totals for the Town as a whole

* These figures are included in the Wards in which the persons resided † These births are allocated to the Ward in which the mother resided.

TABLE 10.—Showing Birth Rates, Mortality Rates from all causes, from Tuberculosis of the Lungs, Respiratory Diseases, and Malignant Diseases, together with Infantile Mortality and Infantile Diarrhœa Death Rates per 1,000 Births.

APPENDIX 1.

							,	2111	ENDIX 1.
				Mortality	Rates per 1,000 Pop	pulation from			1 6 (1)
Year.	Popu- lation.	Birth Rate.	Death Rate.	Pul- monary Tuber- culosis.	Respiratory Diseases (excluding Pulmonary Tuberculosis)	Malignant Diseases.	Infantile Diarrhea Death Rate per 1,000 Births.	Infantile Mortality per 1,000 Births.	Infantile Mortality per 1,000 Births, England & Wales.
1882-1886		38.9	23.2	2.31	5.15	0.24	34.9	212	142
1887–1891		35.9	22.2	1.64	6.21	0.30	27.9	217	145
1892	88,019	35.9	20.9	1.96	5.79	0.36	15.8	189	148
1893	89,022	35.4	22.8	2.00	5.12	0.52	46.1	227	159
1894	90,024	34.5	19.9	2.25	4.04	0.36	16.7	174	137
1895	91,027	35.0	25.6	2.08	7.02	0.44	54.9	249	161 148
1896	92,030	34·6 35·1	20·2 21·9	2·00 2·06	4⋅38 5⋅27	0·50 0·44	$16.2 \\ 29.9$	173 202	151
Average 5	years 93,033	33.8	22.1	2.21	3.60	0.59	26.9	223	156
1897 1898	94,036	31.9	19.0	1.82	3.58	0.55	44.6	194	160
1899	95,039	29.9	23.6	1.78	4.22	0.57	82.8	273	163
1900	96,041	30.5	19.7	1.67	4.23	0.54	51.1	208	154
1901	*97,043	27.5	18.9	1.65	3.68	0.69	58.6	227	151
Average 5		30.7	20.7	1.83	3.86	0.59	52.8	225	157
1902	98,158	29.6	19.3	1.44	3.96	0.85	23.4	175	133
1903	99,061 99,971	$27.3 \\ 26.8$	18·7 19·4	1·51 1·49	$\frac{3.88}{3.62}$	$0.55 \\ 0.64$	42·4 70·8	$\begin{array}{c} 216 \\ 232 \end{array}$	$\begin{array}{c} 132 \\ 145 \end{array}$
1904 1905	100,889	26.3	16.6	1.49	3.02	0.73	46.1	174	128
1905 1906	101,816	28.0	19.9	1.38	4.04	0.72	73.3	212	132
Average 5		27.6	18.8	1.46	3.73	0.70	51.2	202	134
1907	102,751	29.0	17.7	1.38	4.14	0.67	$24 \cdot 1$	156	118
1908	103,696	28.6	18.2	1.23	3.41	0.80	52.2	201	120
1909	104,648	25.4	16.3	1.15	3.90	0.56	21.5	157	109
1910	105,610	25.4	16.5	1.03	3.18	0.84	37.0	168	105
1911		23.2	18.1	1.04	3.16	0.77	81.3	210	130 116
Average 5	years 108,012	26·3 23·0	17·4 15·0	1·17 0·85	3·56 3·36	0.73 0.82	43·2 14·5	178 145	95
1912 1913	109,021	22.8	16.8	0.96	3.31	0.90	49.8	174	108
1914		23.5	16.4	1.02	3.77	0.85	27.0	158	105
1915		19.5	16.9	0.88	4.08	0.76	38.8	166	110
1916	100,183	16.5	17.3	0.94	3.76	1.15	19.4	151	91
Average 5		21.1	16.5	0.93	3.66	0.90	29.9	159	102
1917	93,779	14.4	16.0	1.12	3.44	0.94	12.6	143	96
1918	90,770	14.3	18.9	0.85	4.02	1.22	5·5 8·7	126	97 89
1919 1920	102,391	$\frac{15.6}{23.3}$	15·2 14·1	$0.91 \\ 0.72$	$\frac{3.67}{2.90}$	$1.03 \\ 1.22$	13.8	$\begin{array}{c} 118 \\ 129 \end{array}$	80
	*105,300	22.3	13.6	0.64	2.73	1.41	17.9	118	83
Average 5		18.0	15:6	0.85	3.35	1.16	11.7	127	89
1922	30 - 300	18.6	15.4	0.87	3.28	1.03	6.1	114	77
1923	104,800	17.4	13.4	0.90	2.69	1.38	4.9	103	69
1924	103,400	16.4	14.8	0.70	3.59	1.14	8.2	126	75
1925	102,300	16.0	14.8	0.81	3.17	1.23	3.0	109	75 70
1926	99,600	16·1 16·9	13·2 14·3	0·69 0·79	2·25 3·00	$1.32 \\ 1.22$	8·1 6·1	86 108	73
Average 5	years 99,270	15.2	15.4	0.79	2.21	1.22	8.6	110	69
1928	1	15.0	13.3	0.86	1.72	1.59	6.7	79	65
1929	100,300	14.0	15.0	0.74	2.16	1.55	10.7	104.8	74
1930	100,200	13.35		0.70	1.36	1.48	10.5	75.5	60
1931	99,180	13.03	14.2	0.75	1.78	1.56	3.9	85.9	66
Average 5			14.1	0.75	1.84	1.54	8.1	91.0	67
1932 1933		$\begin{array}{ c c c c }\hline 12.0 \\ 12.1 \\ \end{array}$	$13.0 \\ 14.6$	0.71	$1.06 \\ 1.23$	1·34 1·69	3·4 11·1	86·4 74·7	$\begin{array}{c} 65 \\ 64 \end{array}$
1004	95,900 94,300	11.8	13.5	0·69 0·57	1.23	1.81	3.6	70.3	59
1934	94,300	11.0	19.9	0.01	1.00	1.01	0.0	10.3	0,7

^{*} The Population for the Census years 1891, 1901, 1911, 1921 and 1931 are taken from the Census Returns; the Populations for the other years are Estimates of the Registrar General.

Appendix 2.

METEOROLOGY.

THE METEOROLOGICAL OBSERVATORY is at Queen's Park. It is attached to the Meteorological Office and is classed as an Auxiliary Climatological Station. The results of the observations are sent to that office, and monthly returns are published from all the stations which supply readings. A weekly return of temperature and rainfall recorded in Burnley is sent to the Registrar-General, and is published in a weekly return sent out from his office.

The Instruments consist of a Kew pattern barometer, the reservoir of which is 458 feet above sea level. In the enclosure are the following:—

In the Stephenson Screen: ... $\begin{cases} \text{Wet Bulb Thermometer.} \\ \text{Dry Bulb Thermometer.} \\ \text{Maximum Thermometer.} \\ \text{Minimum Thermometer.} \end{cases}$

Solar Radiation Maximum Thermometer.
Grass Minimum Thermometer.
Earth Thermometer—1 foot.
—4 feet.
Sunshine Recorder. (Campbell Stokes).
Rain Gauge. (8 inches in diameter).

The floor of the Stephenson Screen is 461 feet above sea level.

The Readings are taken daily at 9 o'clock a.m., G.M.T., and the results are posted each day in front of the Town Hall, and published weekly in the local newspaper.

The following Table gives a Monthly Summary of the Readings:-

APPENDIX 2.

MEAN METEOROLOGICAL READINGS, RECORDED AT QUEEN'S PARK, 1934.

LAT.: 53° 47′ 30 N. LONG: 2° 14′ 30 W.

Barometer Cistern 458 feet above Mean Sea Level.

													162	2				
		1	<u>a</u>			2	9	1~	-1	0.1	-	-31	-	-	61	t~	1	36
AT			<u> </u>			L	61	1	ಣ		l	-1	1	1	Ç1	-	ı	∞
VIND						7	1-	01	ಣ	17	က	s.	9	21	9		G1	65
HE W M.T.)F:				L	00	∞	!~	2	1~	Ġ.	11	00	∞	15	∞	==	105
)F T]	AYS (u			10		C1	≎1 -		1	c1	00	12	es	21	4	76
ON C	No. of Days of	1	ų u			00		9	က		¢1	ಣ	-	an	C1		9	88
DIRECTION OF THE WIND AT 9 A.M. G.M.T.	No		نا 		-		- c1	٠.	6 61	G1	9 5		- P	10	- 1	- 1	<u>∞</u>	62 5
DIR		1 -	2		H	-	1		es						-			8 35
	_	+-				-	<u>'</u>					- th						<u> </u>
INE	Most in a		Day			19th	26th	27th	16th	31st	2nd	8th, 19th	24th	18th	8th	2nd	10th	2.6.34
BRIGHT SUNSHINE	W		Am-		Hrs.	8.8	12	9.4	10.1	12.9	14.3	12.6	11.1	8.9	6.5	5.1	1.0	14.3
GHT S			Daily Mean		Hrs.	0.77	1.24	2.31	3.71	4.22	5.87	6.97	4.18	4.43	1.68	0.72	0.02	3.01
BRI		F	Am-		Hrs.	24.0	34.8	71.7	111.4	130.8	176.1	216.0	129.7	132.9	52.0	21.5	e;	262 1103.1 3.01
		No.	days			18	17	£1	56	26	53	30	31	27	-21	10		
	Most in a		Day	month		15th	24th	16th	11th	15th	8th	27th	2nd	26th	4th	8th	#th	4.10.34
RAINFALL	Most		Am-		M.M.	14.0	60.50	9.7	15.5	21.6	14.3	11.6	20.5	11.3	33.3	15.2	18.0	33.3
RA]		F	Fall		M.M.	105.2	11.6	2.1.2	74.6	83.0	59.9	57.5	113.0	6.98	148.5	47.4	143.5	216 1002.3
		No.	days			18	œ	₹ 6	18	16	13	12	21	17	82	17	57	216
τλ.	ibimu		Relat	лвэМ	%	89.0	8.98	82.1	8.92	74.5	72.1	71.1	79.4	80.8	84.9	90.0	90.9	81.5
	COUND				41.6	40.8	40.9	43.1	47.5	52.4	57.0	57.8	56.3	53.8	48.3	47.0	48.9	
	In Ground Mean Mean 1 foot 4 feet						38.3	39.0	14.1	50.6	26.8	61.7	59.5	56.5	52.1	44.0	14.7	48.8
		Mean				56.5	63.0	76.5	88.3	95.4	107.4	113.3	104.6	101.8	79.3	57.1	54.5	81.5
		Mean	Grass			30.5	30.8	30.1	33.7	37.6	45.6	49.9	48.1	46.0	42.0	34.3	38.5	38.9
STERS		mes Ire		Date		20th 25th	2nd	14th	7th	17th	1st	#th	31st	1st, 2nd	31st	1st	22nd	2.2.34
МОМ		Extre	1se	Гомо		24	21	24	25	33	9	43	88	37	33	25	36	22
THER	THERMC Color						13th 15th	25th	15th	11th	16th	11th	8th	14th 28th	1th	26th	8th	11.7.34
	In Screen Mean Temp,						6†	54	99	#2	11	98	73	1.7	83	51	55	86
	IN			39.4	39.1	39.5	44.5	49.8	57.0	62.8	58.0	56.6	49.7	42.1	45.5	48.7		
				34.3	34.1	33.8	37.8	42.1	48.3	53.5	50.6	49.1	45.3	37.5	42.5	42.4		
		N.	Max.			44.5	43.8	45.2	51.3	57.5	82.9	72.2	65.4	64.1	54.1	16.7	48.5	54.9
	5	essure	i coci		inches	29.940	30.329	29.560	29.645	30.060	30.018	29.942	29.756	29.810	29.770	29.956	29.413	29.850
	Mean	Air Pressure at Mean	oca o		Mbrs.	1013.9 29.940	1027.0	1001.0	1003.8	1017.9	1016.5	1014.0	1007.6	1009.5	1008.1	1014.4	0.966	1010.8
		1934				Jan.	Feb.	March	April	Мау	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Whole

During the year the amount of rainfall in millimeters, according to wind direction at 9 a.m., was as follows:-

1002.3	17.0	103.5	104.7	350.2	143.4	194.8	31.8	36.1	8.06	Rainfall in Millimetres
Total	Calm	W.	E.	S.W.	S.E.	S.	N.W.	N.E.	Ŋ.	Direction of Wind

WEATHER PHENOMENA.

	Gale	1
	Ground Frost	99
	Fog (at obs. hour)	35
NUMBER OF DAYS OF	Thunder Heard	6
NOM	Hail	က
	Snow or Sleet (at obs. hour)	က
	Snow or Sleet	11

		at me Sea Le	Mean			K -	SOLUTE OF TEMP	UIE EXIKEME TEMPERATURE	MES IRE	Moon	HAT	NIMUM	No. of	MOMETERS	TERS		No.	F		M	DAY	#				MOST IN DAY	V N
Year	1	Ins.	Mbs.	Mean Temp.	Mean Daily Range	High- est Read- ing	Date	Low- est Read- ing	Date	Solar Max.	Low- est Read- ing	Date	Ground Frost	Mean of 1 foot	Mean of 4 feet	Relative I	Days	Fall	:	Amount	mt	Date	or Days	Am- ount	Mean	Am- ount	 Date
1908		29.982	1015.3	47.1	12.5	° 52	2.7.08	12	2.12.08	88.7	011	5.1.08	134	47.3	47.5	°°° \$	193	Ins. 37.27	M.M. 946.7	Ins. 1.27	M.M. 32.3	80.9.03	272	Hrs. 1201	Hrs. 3.3	Hrs. 3	30.6.08
1909		29.934 10	1013.6	45.8	13.0	22	15.5.09	10	20.12.09	94.7	10	6.12.09	170	€.5.5	46.3	83.0	190	40.20	1.1201	1.11	28.2	3.2.09	282	1144	3.1	13.5	8.5.09
1910		29.861 10	1011.2	47.0	12.8	282	13.7.10	11	27.1.10	88.0	l~	22.1.10	109	16.6	16.9	82.3	500	18.04	1220.2	1.86	47.2	01.11.01	283	1144	3.1	14.4	14.7.10
1161		29.987 10	1015.4	18.1	13.1	85	9.8.11	17	1.2.11	89.1	11	1.2.11	106	6.74	18.1	90.5	183	14.14	1121.2	1.61	+0.0	17.6.11	588	1334	3.7	14.6	8.6.11
1912		29.910 10	1012.8	16.5	11.5		30.5.13	6	3.2.12	85.0	Zero	3.2.12	118	47.3	47.9	83.5	215	48.09	1221.5	1.44	36.6	26.10.12	262	£68	ę;	13.1	23.4.12 24.4.12
1913		29.955 10	1014.4	18.1	11.2	22	2.8.13 3.8.13	15	31,12.13	86.4	10	31.12.13	98	47.7	11.7	82.7	194	39.45	1002.0	1.17	29.7	15,4.13	271	1055	2.9	13.3	26.7.13
1914		29.936 10 29.910 10	1013.7	47.8	13.0	83	27.9.13 21.7.14 12.6.15	18	11.114	88.9	14	1.1.14	103 · 117	48.0	48.5	81.9 80.8	220 200	46.10 40.23	1170.9	1.26	32.0 1 33.5	11.11.14	287 292	1205 1218	80 80 80 80	15.1	14.6.14 18.6.15
1916		29.856 1011.0		45.8	12.9	11	12.6.16	19	16.12.16	No therm	18	24.3.16 6.12.16	1117	17.1	47.5	83.5	223	14.87	1139.7	1.33	33.8	15.8.16	272	975	2.7	13.7	16.6.16
1917		29.950	1014.1	45.3	11.6	62	19.5.17	9	5.2.17	do.	15	10.3.17	127	46.0	16.7	81.1	172	36.68	931.7	1.04	26.4	10.3.17	279	1136	3.1	15.0	1.7.17
1918		29.800 10	1009.2	48.0	13.1	80	22.5.18	9	14.1.18	do.	13	9.1.18	104	47.6	45.8	18.4	202	32.39	823.7	1.18	30.0	15.9.18	288	1189	67.	14.0 1	19.5.18
1919		29.893 10	1012.3	45.0	13.0	81	30.5.19	14	16.11.19	do.	10	16.11.19	113	45.3	6.9	80.1	206	35.68	906.3	1.18	30.0	1.1.19	872	1280	3.5	14.0	14.5.19
1920		29.976 10	1015.1	47.5	15.0	92	17.6.20	13	13.12.20	87.7	18	6.1.20	63	47.7	18.0	9.4.6	241	15.80	1087.2	1.39	35.2	9.2.20	274	1018	8.2	14.7	4.5.20
1921		30.086	1018.8	48.9	13.0	85	25.6.21	ᄗ	9.11.21	91.7	19	16.4.21	[건	49.5	19.5	9.62	210	37.40	948.5	1.34	34.0 2	27.12.21	272	1361	3.7	15.3	9.0.20 7.6.21
1922	-	29.954 10	1014.3	45.6	12.4	22	1.6.22	17	18.1.22	87.7 No.	16	6.2.22	86	9.94	47.9	6.18	225	43.79	1111.7	1.64	41.8	8.8.22	278	1072	5.9	14.8	2.6.22
1923		29.904 10	1012.6	16.4	11.6	1 8	13.7.23	17	30.11.23	therm	15	30.11.23	96	17.1	47.8	83.4	256	57.90	1471.8	1.80	45.8	12.4.23	263	1035	8.5	12.3	6.6.23
1924		29.924 10	1013.3	16.9	11.7	98	12.7.24	17	3.3.24	do.	15	9.1.24	110	47.3	47.3	82.9	241	42.10	1068.8	1.20	30.5	31.5.24	27.5	950	5.6	13.6	14.6.24
1925		29.946 10	1014.2	46.7	12.9	70	25.7.25	15	25.12.25	do.	11	14.12.25	139	47.4	48.2	81.5	214	11.4	1051.4	1.24	31.1	10.2.25	284	1097	3.0	13.2	9.6.25
1926	5 29.961		1014.7	47.8	12.6	78	13.7.26	19	31.10.26	95.0	12	31.10.26	97	18.7	18.6	81.8	855	14.0	0.6601	1.49	37.3	1.11.26	590	1021	8:1	14.4	2.7.26
1927	29.919		1013.2 4	46.8	11.8	82	10.7.27	18	20.12.27	87.0	12	20,12,27	83	47.9	48.3	82.0	228	46.63	1184.4	1.43	36.3	21.7.27	271	876	5.6	13.9	8.5.27
1928	29.932		1013.6	9.74	13.0	15	5.8.28	18	9.12.28	87.3	13	9.12.28	68	47.9	48.1	81.0	88.	51.4	1305.5	2.04	51.8	20.8.28	285	1089	5.9	14.6	2.6.28 20.6.28
1929	29.998	998 10	1015.8	16.6	13.8	27.	15.7.29	11	14.2.29	84.8	9	14.2.29	191	47.2	47.4	8.08	199	42.19	1071.6	1.30	32.5 1	1.11.29	289 1	1273.1	3.5	14.0	4,7.29
1930	29.890	890 10	1012.1	17.3	11.6	28	27.8.30	17	20.3.30	83.6	20	18.2.30	131	47.8	48.1	83.4	212	52.0	1320.7	1.39	35.3	26.5.30	272 1	1048.9	5.9	14.3	8.6.30
1931	29.886		1012.0	47.0	11.6	27	22.7.31	18	10.3.31	82.2	11	10.3.31	86	47.3	1.74	83.8	217	47.23	1199.7	1.93	49.0	3.11.31	258	958.5	5.6	13.9 2	26.6.31
1932	29.998		1015.8 4	17.5	12.1		11.8.32	19	12.3.32	33.0	16	12.3.32	68	47.8	6.74	2.18	221	12.74	1085.6	1.96	49.8	2.9.32	266	10001	8:2	15.0	15.6.32
1933	29.921	1013	o)	18.4	5.5	78	4.7.33	12	24.1.33	85.6	10	24.2.33	110	48.8 48.8	±0.3	79.5	181	33.54	838.6	2.24	56.0	25.2.33	279 1	1205.8	65.	14.8	5.7.33
Mean 26 yrs	29.933	33 1013.	9	16.9	12.5		1			ı	I		109	47.4	47.6	81.9	213	43.01	1091.2				273 1	1104.6	3.0		
1934	29.850		1010.8 4	48.7	12.5	86 1	11.7.34	 [3]	2.2.34	81.5	19	25.1.34	56	18.4	18.9	81.5	216	40.09	1002.3	1.33	33.3	4.10.34	262	1103.1	3.0	6.4	9.6.31
																				L	ı					L	

BANK HALL CHILDREN'S HOSPITAL.

Table 1.—Showing Diseases and Results of Treatment of Children Admitted during 1934.

Average Duration of Stay of those	DAYS	58	63	50	35	50	78	6+	57	109	84	1-	38	10	63	53	83	59		120	53		89			
Remaining	31/12/34	-	i	G	1	-		-		1	-	1			-	1	1	7	-	1			6	-	25	
Died		1	1	ກ	55	-	1	1			j	_	1	1	1	1		7		_	©1				18	
Removed	Advice	1	-	1	7	1	-	1		-	I	1	1	1	1			က		,			-		9	
1934	I.S.Q.	1	-	1	ç1	-	1	-	_	1	1	1	_	-		_		1			ಣ		-		12	
Discharged in 1934	Improved	ಞ.	- ₹	-	ଚା	1		1	-	1	1	1	1		7	1	1	1		ତୀ	1		∞		27	
Dis	Well	ಣ	6	14	7	က	วา	-	_	-	1	1	જા	1	9	1	-	10		1	I		17		69	
Total	Cases	6	15	27	1+	9	ଚୀ	?1	က	G)	ଚୀ	Ç1	ಣ	-	11	7	1	12		က	വ		36		157	
Ad-	1934	œ	œ	57	<u>21</u>	ထ	I	ଚୀ	ಣ	०।	-	ତୀ	ಣ	-	10	1	I	10		-	4		36		136	
Remain-	1/1/1934	1	7		ભ		ତୀ	1		1	_	i		1	-	-	-	ଚୀ		61	-				21	
Diagnosis	Ciagnosis	Anæmia	Malnutrition	Alimentary Diseases	Respiratory Diseases	Skin Diseases	Pyelitis	Eneuresis	Oxyuris Vermicularis	Convulsive Disorders	Incipient Tuberculosis	Tuberculosis Meningitis	Adenitis	Bell's Paralysis	Rickets	Acute Tonsillitis	Ophthalmia	Prematurity	Congenital Specific	Disease	Congenital Defects	Debility, Mismanagement,	etc			

APPENDIX 3.

Table 11.—The following Table Shows the Ages and the Number of the Children Admitted. Period—1/1/34 to 31/12/34.

nder	1-2	2-4	1-2	2-3	3-4	4-5	5-6	6-7	7-12	1-2	2-3	3-4	Over	Total
week	weeks	weeks	m'ths	yrs	yrs	yrs	4 yrs							
4	1	6	11	12	5	3	6	4	14	27	14	9	20	136

Source of Admission of Children.

General	Infant Welfare	Transferred from
Practitioners.	Clinics.	Maternity Ward.
47	 87	 2

Table 111.—Showing the Ages and Causes of Death of Children at Bank Hall Children's Hospital.

Period-1/1/1934 to 31/12/1934.

	!			Week	s.			Mon	ths.			Years.			
Cause of Death.		Total	under 1 wk.	1-2	2-3	3-4	1-3	3-6	6-9	9-12	1-2	2-3	3-4	over 4	
Alimentary Diseases	•••	3	_	_	_	-	1		1	1	-	_	-	_	
Respiratory Diseases	•••	5	-	-	_	-	_	1	2	1	1	-	_	_	
Prematurity	•••	4	3	_	_	-	I	_	_	=	-	_	-	_	
Tuberculous Meningitis	•••	1		-	_	_	_	1	_	_		-		_	
Convulsions		1		-	_	-	_	1	_	-	-	-1	_	_	
Spina Bifida		1	_	-	_	1	-		-	-	-				
Anæmia		1	_	-	_	_	-	_	_	1	-		_	_	
Mongolism		1	_	-	_	_	_		-	1	_	_	_	_	
Cong. Specific Disease		1		_	-		-		1	_	_			_	
		18	3	_		1	2	3	4	4	1		-	_	

BANK HALL MATERNITY HOSPITAL-1934.

Cases in Hospital on Januar	y 1st, 1934:—					
(a)	Delivered			17		
(p)	Undelivered	•••		1		18
Number of cases admitted d	luring 1934					364
Cases which received Ante	Natal inpatient	treati	ment d	uring 1	1933,	
and were re-admitted for	or confinement i	n 1934				1
Total cases dealt with					•••	383
Number of cases remaining	in Hospital, Dec	ember	31st, 1	934:		
(a)	Delivered			14		
(b)	Awaiting Deli	very		3		17
Number of External cases						10

TABLE VI-Particulars of the Intern. Cases.

		Nu	mber o	of Birth	Number	Number of Deaths.			
No.			Stillbirths.				Infantile.		
of Cases	Nature of Cases.	Live births.	М.	F.	Total births.	Mater- nal.	М.	F.	
192	Normal	189	2	1	192			1	
3	Multiple Pregnancy	4	$\frac{1}{2}$		6	_	2	2	
10	Premature Labour	9	1		10	1 - 1	1		
4	Prolonged Labour	4		_	4	_	_	_	
2	Hyperemesis	2	_	_	2	_	_	_	
9	Uterine Inertia	8	- 1	1	9	_	1 — 1	_	
1	Disseminated Sclerosis	1	_		1		1	_	
1	Osteo-Arthritis	_	1	_	1			_	
2	Anæmia	1	1	<u> </u>	2		_	_	
2	Debility	2		- 1	2		_	_	
1	Fœtal Distress	1	-	_	1	- 1	_	_	
I	Hydrocephalus	_	1	-	1		- 1	-	
	Contracted Pelvis:								
7	(a) Cæsarean Section	7			7	_			
28	(b) Spontaneous	28			28	_		_	
3	(c) Bougie Induction	3	_		3	_	_		
	()			1					

		Number of Births.									
No.			Stillb	oirths.			Infa	ntile.			
of Cases	Nature of Cases.	Live births.	М.	F.	Total births.	Mater- nal.	М.	F.			
12 2 4 2 22	RENAL COMPLICATIONS: (a) Albuminuria (b) Pyelitis (c) Hyperpiesia (d) Eclampsia Cardiac Disease	10 2 3 1 22		2 - 1 1	12 2 4 2 22	2 — 1 —	1 - -	_ _ _ _ 1			
9 1 5 19	HÆMORRHAGES: (a) Accidental (b) Placenta Prævia (c) Post Partum Malpresentations	$-\frac{6}{4}$ 14	3 1 1 2		9 1 5 19	=	2 - 1	1 — —			
342	Total Deliveries during 1934	321	15	9	345	3	8	5			
24	Cases admitted for Ante Natal treatment, Miscarriages, etc. during 1934	_	-	_		1	_	_			
10	Extern cases Delivered during 1934	10	_	-	10						

MUNICIPAL GENERAL HOSPITAL.

Statistics relating to the year ended 31st December, 1934.

(A) IN-PATIENTS.

1.	Total number of admissions (including infants born in Hospital)	2414
2.	Number of women confined in hospital	105
3.	Number of live births	100
4.	Number of still births	5
5.	Number of deaths among the newly-born (i.e. under four weeks of age)	8'
6.	Total number of deaths among children under one year (including	
	those given under 5)	16
7.	Number of Maternal deaths among women confined in hospital	7
8.	Total number of deaths	390
9.	Total number of discharges (including infants born in hospital)	1994
10.	Duration of stay of patients included in 8 and 9 above.	
	Number of cases whose total stay was for the following periods:—	
	(a) Under four weeks 1986	
	(b) Four weeks and under thirteen weeks 326	
	(c) (c) Thirteen weeks or more 72	
11.	Number of beds occupied:—	
	(a) Average during the year 194	
	(b) Highest, on 17/5/34 236	
10	(c) Lowest, on 20/8/34 and 21/8/34 143	
12.	Number of surgical operations under general anæsthetic (excluding dental operations)	692
	AT 1 (1.1. '	270
		210
	* This figure relates only to children born in hospital.	

(B) OUT-PATIENTS.

There is no recognised out-patient department; patients after discharge may return for massage, electrical treatment and X-Ray treatment.

Under the Council's Tuberculosis Scheme, persons suffering from Tuberculosis of the skin and glands, are treated at the electro-therapeutic department.

Children from the Maternity and Child Welfare Centres and School Children are given X-Ray examinations and light treatment.

Total number of persons seen in the out-patient department 477

Number of these persons who were subsequently admitted for in-patient	
treatment in the Institution	Nil.
Number of these persons who had received in-patient treatment in the	
Institution	72
Total number of attendances in the out-patient department $\hdots \dots \hdots \dots$	8149
If there is an ante-natal clinic, give the total number of expectant mothers	
seen and the total number of attendances	Nil.
If there is a Venercal Diseases clinic, give the number of patients seen	
and the total number of attendances	Nil.

APPENDIX 4.

MUNICIPAL GENERAL HOSPITAL.

Table showing the classification of the accommodation for sick and maternity cases and the number of beds occupied on the 31st December, 1934.

				BEDS										
Classification of Wards	1	Number of Wards	MEN		WOM	MEN	CHILI (under l	16 years	Total					
			Pro- vided	Occu- pied	Pro- vided	Occu- pied	Pro- vided	Occu- pied	Pro- vided	Occu- pied				
Medical Surgical Children Venereal Cuberculosis solation Maternity	 	1 2 —	54 44 7 	46 35 2 -	55 55 8 14 10 cots	55 42 — — — — 6 3 infants	52 ————————————————————————————————————	26* — — — —	109 99 52 15 — 14 10 cots	101 77 26 2 — — — 6 3 infants				
Total		8	105	83	132+ 10 cots	103+ 3 infants	52	26	289+ 10 cots	212+ 3 infants				

^{*} Includes 5 Mental Defectives.

APPENDIX 4.

Classification of In-patients who were Discharged from or who Died in the Municipal General Hospital during the Year ended 31st December, 1934.

DISEASE GROUPS.		Child (under 1 of ag	6 years	aı	en nd men.	Total.
		Dis- charged	Died	Dis- charged	Died	
Acute infectious disease		44	5	22	22	93
Influenza		- 1	_	3	_	3
Tuberculosis—						
Pulmonary		- 1	1	14	10	25
Non-Pulmonary		5	1	17	3	26
Malignant Disease		_	_	57	42	99
Rheumatism—						
(1) Acute rheumatism (rheumatic fever) together	with					
sub-acute rheumatism and chorea		12	1	13	_	26
(2) Non-articular manifestations of so-called "rh		l l				1
atism " (muscular rheumatism, fibrositis, le	ımb-					
ago and sciatica)		-	_	31	2	33
(3) Chronic arthritis			_	22	_	22
Venereal Disease		1	_)	12	1	14
Puerperal Pyrexia			_		_	
Puerperal Fever—						
(a) Women confined in the hospital				_	1	1
(b) Other cases		_	_	_	1	1
Other diseases and accidents connected with pregn	ancy					
and childbirth		1	_	97	13	111
Mental Diseases—		1				
(a) Senile Dementia		_	_	7	_	7
(b) Other		2	_	16	1	19
Senile Decay			_	35	28	63
Accidental Injury and Violence		18	3	93	13	127
IN RESPECT OF CASES NOT INCLUDED ABOVE:						
Disease of the Nervous System and Sense Organs		15	3	90	11	119
Disease of the Respiratory System		40	5	124	42	211
Disease of the Circulatory System		1		112	111	224
Disease of the Digestive System		50	5	323	32	410
Disease of the Genito-urinary System		20	1	207	18	246
Disease of the Skin		44	2	137		183
Other Diseases		29	8	59	4	100
Mothers and Infants Discharged from Maternity W						
and not included in above figures —Mothers		_	_	108	_ 1	108
—Infants		93	_			93
Persons not falling under any of the above headings		19	_	1		20
Totals		394	35	1600	355	2384

SUMMARY OF WORK CARRIED OUT DURING 1934. MUNICIPAL GENERAL HOSPITAL. X-RAY AND ELECTRO-THERAPEUTIC DEPARTMENT.

Total 222 1276 3479 12672 99 2342 1289 983 182 794 203 7917 57 71 Cottage Homes, etc. Corporation Sick Staff, 9 10 ++ 29 153 148 24 65 237 3 Service Medical School 53 16 547 538 20 48 909 01 87 128 Child Welfare Maternity and Ante Natal-40 Children —88 Scheme Tuberculosis Dispensary Scheme 94 7206 15 4730 4054 2525 ಣ 79 93 627 Out-patients Hospital 2093 1901 2767 16 43 13 11 333 267 599 123 In-patients Hospital 517 1276 242 1856 2233 1166 65 142 56 1123 338 # 59 57 983 Mercury Vapour Lamp Carbon Arc Lamp Total Treatments Kromayer Lamp Radiographed TREATMENTS:-Attendances Screened Wood's Glass Examinations Treatments Treatments Treatments Patients Patients Patients Patients Patients Examinations Treatment Treatment Electrical Exercises Massage X-Ray Light

Extract from the Report of the Medical Superintendent of the Burnley Joint Hospital Board, 1934.

Table showing the Notifications of the Four Principal Infectious Diseases in the areas of the Constituent Authorities, and the numbers isolated, together with the percentage isolated.

Authority		Scarlet Fever	Diph- theria	Scarlet Fever+ Diphtheria	Enteric Fever
Burnley Borough— Total Notified Total Isolated		354 234	347 297	6 6	1 _
Percentage Isolated		66	85	100	_
Burnley Rural District— Total Notified Total Isolated Percentage Isolated		58 36 62	12 10 83	=	_
			00		_
Brierfield Urban District— Total Notified Total Isolated	,	20 13	1 2	_	=
Percentage Isolated		65	_	_	_
Padiham Urban District— Total Notified Total Isolated	ج : 	46 36	19 18	=	=
Percentage Isolated	•••	78	95	_	

APPENDIX 6.

HOUSING.

PARTICULARS OF INSPECTIONS UNDER THE HOUSING ACTS MADE DURING 1934.

Types of Houses Inspected or Re-Inspected, Classified according to the Number of Rooms.

	l Room	Room and Attic	2 Rooms	2 Rooms and Attic	3 Rooms	3 Rooms and Attic	4 Rooms	4 Rooms and Attic	5 Rooms	5 Rooms and Attic	6 Rooms	7 Rooms	8 Rooms	Total
gh ses	-	_	50	33	58	12	870	13	68	4	7	_	2	1117
o-back ses	-	_	141	125	13	2	3	-	_	_	1	_	_	285
Houses	-	-	16	7	8	1	_	_			-	-		32
Room llings	20	-	_	_	_		_	-	_		-		-	20
ents		-			_		-	_		- }	-	-	-	_
ected	20		207	165	79	15	873	13	68	4	8	_	2	1454

Heights of Rooms in Houses Inspected.

Kind of House	Kind of Room	Under 8 feet	Between 8 & 9 feet	Between 9 & 10 feet	10 feet & above	Total
	Living Rooms	68	667	1359	4	2098
Through Houses	Bedrooms	141	837	1241	9	2228
Back-to-Back	Living Rooms	60	212	17	_	289
Houses	Bedrooms	198	70	27	11	306
O: 1 II	Living Rooms	14	17	1	_	32
Single Houses Single Room Dwellings	Bedrooms	17	11	7	6	41
	_	13	7	_		20
Basements		_			_	_

Floor Space in Houses Inspected.

Kind of House	Kind of Room	Under 125 sq. feet	125 &150		Between 200 &250 sq. feet		Total
m 1 II	Living Rooms	757	428	849	58	6	2098
Through Houses	Bedrooms	658	548	905	104	13	2228
Back-to-Back	Living Rooms	21	35	165	62	6	289
Houses	Bedrooms	19	16	92	155	24	306
	Living Rooms	2	7	16	6	1	32
Single Houses	Bedrooms	8	6	17	9	1	41
Single Room Dwellings	_	l	2	13	2	2	20
Basement			_	-		_	

Cubic Capacity of Rooms in Houses Inspected.

Kind of House	Kind of Room	Under 1,000 cubic feet	Between 1,000 and 1,500 cubic feet	Between 1,500 and 2,000 cubic feet	2,000 cubic feet	Total
Through Houses	Living Rooms	584	1105	398	11	2098
Tinough Houses	Bedrooms	524	1185	497	22	2228
Back-to-Back	Living Rooms	12	138	132	7	289
Houses	Bedrooms	19	108	145	34	306
Single Houses	Living Rooms	2	16	-13	1	32
Single Houses	Bedrooms	9	17	14	1	41
Single Room Dwellings —		1	14	5		20
Basements	_	_	_		_	_

Overcrowding in Houses Inspected.

Overcrowded Houses on the basis of 40 sq, feet of floor space per adult and 30 sq, feet of floor space per child under 10 years of age.

Houses occupied by I family only	 39
Houses occupied by more than 1 family	 7
Total Overcrowded	 46
Total Inspected	 1454
Percentage Overcrowded	 3.2

POLICE COURT PROCEEDINGS DURING 1934.

Result.	Dismissed—Probation of Offenders Act. Costs 29/	s trough Work done—Withdrawn. Costs 4/	dresses of r in Rent	Bin provided—Withdrawn. Costs 14/6d.	Do.	without Premises vacated—Withdrawn.	Do.	 Do.
Offence.	Selling milk deficient in fat	Failing to repair defective eaves trough	Not inserting names and addresses of Owner and Medical Officer in Rent Book	Failure to provide dust bin	Do.	Using premises as Knackery without licence	Do.	Do.
Act, Bye-law or Regulation under which Proceedings were taken.	Food and Drugs (Adulteration) Act, 1928. Section 2	Town's Improvement Clauses Act, 1847, Section 74, and Public Health Act, 1875, Section 160	Housing Act, 1925, Section 5	Burnley Corporation Act, 1908, Section 85, and Burnley Corporation Act, 1925, Section 67	Do.	Knackers Act, 1786, Section 8	Do.	Do.
Date of Decision.	Feb. 28th	March 7th	March 7th	April 4th	April 4th	May 25th	May 25th	May 25th

POLICE COURT PROCEEDINGS DURING 1934—(Continued).

Result.	Bin provided—Withdrawn.	s, sub- 1 Fine £1. Costs £1. 1s. 0d.	Fine £1. Costs £1. 1s. 0d.	Fine £1. Costs 10/6d.	Fine £1. Costs £1. Is. 0d.	Bin provided—Withdrawn.	Do.	Do.	Do.	Work done—Withdrawn.
Offence.	Failure to provide dust bin	Selling milk not of the nature, substance and quality demanded	Do.	Do.	Do.	Failure to provide dust bin	Do.	Do.	Do.	Nuisance
Act, Bye-law or Regulation under which Proceedings were taken.	Burnley Corporation Act, 1908, Section 85, and Burnley Corporation Act, 1925, Section 67	Food and Drugs (Adulteration) Act, 1928, Section 2	Do.	Do.	Do.	Burnley Corporation Act, 1925, Section 67	Do.	Do.	Do.	Public Health Act, 1875, Section 96
Date of Decision.	June 3rd	October 3rd	October 3rd	October 3rd	October 3rd	October 24th	October 24th	October 24th	October 24th	October 24th

MINISTRY OF HEALTH RETURNS.

Form M.C.W. 96 (Rev.)

MATERNITY AND CHILD WELFARE.

Return (1) showing the arrangements made for maternity and child welfare by the Council and by Voluntary Associations providing maternity and child welfare services in respect of which the Council pay contributions under Section 101 of the Local Government Act, 1929, or otherwise; and (2) giving particulars of the work done during the year 1934.

HE ED
ar:
Nil.
visiting
50% Nil.
430 667
$1047 \\ 6390$
9577
6
Nil.
10429
4341
702 246

(e)	Total number of children who attended at the Centres during the year and who at the end of the year were:—
	(i) Under 1 year of age 574
	(ii) Between the ages of 1 and 5 years \dots \dots \dots 1228
(t)	Percentage of notified live births represented by the number in (d) (i) \dots
OTHER I	AL CLINICS (WHETHER HELD AT INFANT WELFARE CENTRES OR AT PREMISES):—
(a)	Number of Clinics provided and maintained by the Council 3
(b)	$\begin{tabular}{lllllllllllllllllllllllllllllllllll$
(c)	Total number of attendances by expectant mothers at all Clinics during the year \dots \dots \dots \dots \dots 3637
(d)	Total number of expectant mothers who attended at the Clinics during the year 629
(e)	Percentage of total notified births (live and still) represented by the number in (d) 53

6. Supply of Milk and Food.

Indicate what arrangements are made for this service by inserting "Yes" or "No" in each space in the following table:—

		Milk.		Other Food (Meals).				
Terms of supply.	Expectant Mothers.	Nursing Mothers.	Children under 5 years of age.	Expectant Mothers.	Nursing Mothers.	Children under 5 years of age.		
Free, or at less than cost price, in necessitous cases		Yes.	Yes.	Yes.	Yes.	Yes.		
At cost price in other cases (e.g., sale of dried milk at Centres)	Pasteurise	ed bottled	milk suppli	Velfare or A ed and deliv from Centr	rered to ho	uses of		

7. MATERNITY HOMES AND HOSPITALS.

1.

	Separate maternity institutions provided by the Council.	Other Institutions (with maternity wards) provided by Council e.g., transferred to the Council under Part I of the Local Government Act, 1929	Institutions provided by Voluntary Associations and subsidised by
Number of Institutions	1	1	_
Number of maternity beds (exclusive of isolation and labour beds)	21	14	_
Total number of women admitted to these beds during the year	364	105	_

II.

Number of women (if any) sent by the Council during the year to other Maternity Institutions Nil.

8. Homes and Hospitals for Sick or Ailing Children under 5 years of age.

I.

	Separate institutions provided by the Council for these cases.	Other Institut'ns (with accommodation for these cases)provided by the Council, e.g., trans- ferred to the Council under Part Iof the Local Government Act, 1929	Institutions provided by Voluntary Associations and subsidised by
Number of Institutions	1	1	_
Number of beds provided for such children	24	52	_
Total number of children admitted to these beds during the year	136	172	_

II.

	Instituti	ons .		•••			•••			•••	Nil.
. (Convales	CENT	Homes.								
	(a)			nvalescent irsing mothe							
		(i)	provided b	y the Counc	il						Nil.
		(ii)	provided b	y Voluntary	Associa	tions					1
	(b)	Nun	nber of bed	ds for such	cascs i	n conv	alesco	nt ins	titutior	ıs:—	
		(i)	provided b	y the Counc	il						Nil.
		(ii)	provided b	y Voluntary	Associa	tions*					2
	(c)	Tota	al number o	f cascs admi	itted to	the bed	s inch	uded ir	ı (b) dı	aring	
		the	year		•••	•••	•••	•••	•••	•••	40
							accor	mpanie	d by 6	0 childı	en.
	•			mmodation f					ng the	year	٠
		to o	ther convale	escent institu	ıtions	•••		•••	•••	•••	Nil.
0.]	Homes fo	r Mo	OTHERS AND	BABIES.							
	(a)	Nun	nber of such	Homes:—							
		(i)	provided b	y the Counc	il						Nil.
		(ii)	provided b	y Voluntary	Associa	tions		•••	•••	•••	Nil.
	(b)	Nun	nber of Bed	s in Homes:							
		(i)	provided b	y the Counc	il						Nil.
		(ii)	provided b	y Voluntary	Associa	tions					Nil.
	(c)	Nun	nber of								
	(0)	(i)		beds (exclus	sive of	isolation	ı labo	ur bed	s) incl	uded	
		(-)	•	(i) or (ii) a							Nil.
		(ii)	Women ac	lmitted to	these m	aternity	beds	durin	g the	ycar	Nil.
	(b)	Tota	al number o	f cases admi	tted to 1	hese H	omes o	luring	the ve	a.r:	
	(-)	(i)	expectant								Nil.
		(ii)	mothers a		•••						Nil.
		` ′									Nil.
		(iii)	babies	•••	• • •	• • •			•••		7411.
	(=)	, ,		of such case							1111.

11. DAY NURSERIES,

(a)	Number of Day Nurseries:—					
	(i) provided by the Council					Nil.
	(ii) provided by Voluntary Associations					Nil.
(b)	Number of places for children under 5 years	s of age	in the I	Nurseri	es:—	
	(i) provided by the Council					Nil.
	(ii) provided by Voluntary Associations	•••				Nil.
(c)	Total number of attendances of children	at thes	e Nurs	eries di	uring	
	the weer				_	NII

12. Infectious Diseases.

	Disease.	Number of cases notified during the year.	Number of cases visited by officers of the Council.	Number of cases for whom home nursing was provided by the Council.	Number of cases removed to hospitals.
(1)	Ophthalmia Neonatorum	6	5	3	 Notified from General Hospital. Notified from Maternity Hospital. Nursed at Home.
(2)	Pemphigus Neonatorum		3	-	Occurred in Municipal Maternity Hos pital and were transferred to Municipa General Hospital for Treatment and Nursing.
(3)	Puerperal Fever	7	1	_	5 Notified from General Hospital. 1 Notified from Fever Hospital. 1 Notified from Private Nursing Home
(4)	Puerperal Pyrexia	16	1	-	3 Notified from General Hospital. 11 Notified from Municipal Maternity Hospital. 2 Nursed at Home.
(5)	Measles and German Measles in children under 5 years of age)		153	-	1
(6)	Whooping Cough (do.)	128 cases found by Health Visitors (155 visits paid)	128	_	1
(7)	Epidemic Diarrhœa (do.)	2 cases found by Health Visitors 7 visits paid)	2	_	_
(8)	Poliomyelitis (do.)	2	1	_	l Notified from Hospital. l Nursed at Home.

13. Home Nursing.

(a) Number of nurses employed at the end of the year for the nursing of expectant mothers and children under 5 years of age, maternity nursing, or the nursing of puerperal fever:—

) by the Council \dots \dots \dots \dots \dots Nil.

(ii) by Voluntary Associations—Council requisitions service of a nurse, when required, from Local Nursing Association.

(b) Total number of cases attended during the year by these nurses.

14. MIDWIVES.

- I. (a) Number practising in the area served by the Council for Maternity and Child Welfare at the end of the year=17+5 in Maternity Hospital and 11 in Municipal Hospital.
 - (b) Number:-
 - (i) employed by the Council ... None, apart from Health Visitors and Hospital Staffs.
 - (ii) directly subsidised by the Council Nii. ... Nii. (iii) employed by Voluntary Associations Nil.
 - (c) Number of cases during the year in which the Council paid or contributed to the fee of a midwife.—Compensation at rate of 7/6 per case paid in respect of 5 cases which were admitted to hospital on account of complications. The L.A. has supplied extern

midwife from Maternity Hospital to act for one private midwife during suspension on account of Infectious Disease.

- II. (a) Number of cases attended by midwives during the year:—
 - (i) as midwives
 ...
 ...
 ...
 ...
 349

 (ii) as maternity nurses
 ...
 ...
 ...
 ...
 ...
 ...
 451

 (iii) in Hospitals
 ...
 ...
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 - (b) Number of cases during the year in which medical aid was summoned by a midwife under Section 14(1) of the Midwives Act, 1918.

15. MATERNAL DEATHS.

(a)	in t	mber of women he area served l ing the year:—				•			
	(i)	from sepsis					 		3
	(ii)	from other cau	ses			•••	 		11
(b)	Nur	mber of these cas	ses whic	h died:	_				
	(i)	at home					 	•••	1
	(ii)	in institutions					 		13

MATERNITY AND CHILD WELFARE.

RETURN RELATING TO MATERNITY HOSPITALS AND HOMES MAINTAINED OR SUBSIDISED BY

THE COUNCIL DURING THE YEAR 1934.

- 1. Name and Address of Institution.—Bank Hall Maternity and Children's Hospital.
- 2. Number of Maternity Beds in the Institution (exclusive of Isolation and Labour Beds)—21.
- 3. Number of Maternity Cases admitted during the year-364.
- 4. Average duration of stay-13.5 days.
- 5. Number of cases delivered by—
 (a) Midwives 3
 - (a) Midwives 311 (b) Doctors 31
- Number of cases in which Medical Assistance was sought by a Midwife in emergency—65.
- 7. Number of cases notified as-
 - (a) Puerperal Fever ... —
 - (b) Puerperal Pyrexia ... 11
- 8. Number of cases of Pemphigus Neonatorum—3.
- 9. Number of Infants not entirely breast fed while in the Institution-27.
- 10. (a) Number of cases notified as Ophthalmia Neonatorum—2.
 - (b) Result of treatment in each case—Vision unimpaired in both cases.
- 11. (a) Number of Maternal Deaths-4.
 - (b) Cause of death in each case.
 - I. (a) Pyo-nephrosis.
 - (b) Toxic Albuminuria of Pregnancy.
 - II. (a) Oedema of Lungs.
 - (b) Toxic Albuminuria of Pregnancy.
 - III. (a) Toxæmia.
 - (b) Eclampsia.
 - IV. (a) Concealed Accidental Hæmorrhage.
 - (b) Albuminuria of Pregnancy.

12.	Number of Infants Deaths— (i) Stillborn 24 (ii) Within 10 days of birth 13	
	(b) Cause of death in each case.	
	Still Births. Infantile Deaths	
1.	Hydrocephalus 2 1. Atelectasis 1	
2.	Fætal Distress, requiring Forceps 2. Asphyxia Neonatorum 1	
	Delivery 1 3. Melæna Neonatorum 1	
3.	Accidental Hæmorrhage in 4. Prematurity following	Ì
	Mother 3 Albuminuria 1	ı
4.	Placenta Prævia in Mother 1 5. Prematurity following	Ì
5.	Albuminuria and Hyperpiesia Accidental Hæmorrhage	2
	in Mother 3 6. Prematurity 7	
6.	Anæmia in Mother 1	
7.	Debility in Mother 5	
8.	Uterine Inertia (Forceps)	
	in Mother 2	
9.	Eclampsia in Mother 1	
10.	Premature Labour in Mother 1	
11.	Breech Presentation 1	
12.	Other Malpresentations 3	
		H
	24	ŝ
	= -	-
	Form M.C.W. 96a.	
	MATERNITY AND CHILD WELFARE.	
Ret	URN RELATING TO MATERNITY HOSPITALS AND HOMES MAINTAINED OR SUBSIDISED BY	,
	THE COUNCIL DURING THE YEAR 1934.	
1.	Name and Address of Institution—Municipal General Hospital, Casterton Avenue, Burnley.	,
2.	Number of Maternity Beds in the Institution (exclusive of Isolation and Labour Beds)—14.	
3.	Number of Maternity Cases admitted during the year—105.	
4.	Average duration of stay—11 days.	
5.	Number of Cases delivered by—	
ο.	(a) Midwives 80	
	(b) Doctors 25	
6.	Number of cases in which Medical Assistance was sought by a Midwife in emergency—25.	
7.	Number of cases notified as—	
	(a) Puerperal Fever 1	
	(b) Puerperal Pyrexia 2	
8.	Number of cases of Pemphigus Neonatorum—Nil.	
9.	Number of Infants not entirely breastfed while in the Institution—9.	

10. (a) Number of cases notified as Ophthalmia Neonatorum—2.

(b) Result of treatment in each case—Vision unimpaired in both cases.

11.	(a)	Numl	per of Maternal Deaths—7.
	(b)	Cause	of death in each case.
		I.	Puerperal Fever. Toxic Nephritis. Twin Pregnancy.
		II.	Post Operative Shock. Mitral Stenosis, Cæsarean Section.
		III.	Uræmia. Ac. Nephritis. Eclampsia. Hemiplegia.
		IV.	Paralytic Ileus following Cæsarean Section. Contracted Pelvis.
		v.	Septic Abortion. Burns of abdomen and Leg.
		VI.	Post Operative Shock. Hysterectomy. Fibroid Uterus, complicating pregnancy. Mitral Stenosis.
		VII.	Eclampsia. Pregnancy.
12.	(a)	Numb	er of Infant Deaths—
		` '	till-born 5. Within 10 days of birth 4.
	(p)	Cause	of death in each case.
		Still B	irths. Infantile Deaths.
1.	Mace	rated 1	Fœtus 2 1. Prematurity 4
2.	Anen	cephal	ic 1
3.		•	n the Mother requiring Section 1
4.	Exte	nded B	reech Presentation 1

PART 1. PUBLIC HEALTH (TUBERCULOSIS) REGULATIONS, 1930.

Summary of Notifications during the period from the 1st January, 1934, to the 31st December, 1934, in the County Borough of Burnley, (to which this return relates).

		Formal Notifications.											
	N	Number of Primary Notifications of new cases of Tuberculosis.											
Age-periods.	0 to 1	l to 5	5 to 10	10 to 15	15 to 20	20 to 25	25 to 35	35 to 45	45 to 55	55 to 65	65 and upwards	Total (all ages)	Total Notification
Pulmonary Males ,, Females		1 4	1 2 7	1 3 1	3 4 3	1 3 2 1	7 6 4 7	9 10 1 2	8 5 2 1	5 1 —	4 2 1	39 35 17 24	39 35 17 24

PART II.

SUPPLEMENTAL RETURN.

New cases of Tuberculosis coming to the knowledge of the Medical Officer of Health during the above-mentioned period, otherwise than by formal notification.

Age Periods.	0 to 1	l to 5	5 to 10	10 to 15	15 to 20	20 to 25	25 to 35	35 to 45	45 to 55	55 to 65	65 and upwards	Tot Cas
Pulmonary Males ,, Females Non-pulmonary Males ,, Females	_	_ _ _	_ 1 	=			2 2 3 —		2 1 —			{

The source from which information as to the above-mentioned cases was obtained should be stated below:-

		No. of	Cases.
Source of Inform	nation.	Pulmonary.	Non-pulmonary.
Death Returns (from local Registrars		2	6
Death Returns transferable deaths from		_	_
Posthumous Notifications		_	_
"Transfers" from other areas (other than	transferable deaths)	10	1
Other Sources if any (specify)		— Y	

PART III.

NOTIFICATION REGISTER.

		Pulmonary		No	n-Pulmonar	У	Tal
Number of cases of Tuberculosis remaining at the 31st December, 1934, on the Register of Notifications kept by the Medical Officer of Health of the	Males	Females	Total	Males	Females	Total	Tot Cas
County Borough.	139	113	252	57	92	149	40
Number of cases removed from the Register during the year by reason inter alia of:—							
1. Withdrawal of notification	2	5	7	2	3	5	1
2. Recovery from the disease	37	29	66	35	30	65	13
3. Death	30	28	58	14	6	20	7
4. Other reasons	46	36	82	12	25	37	11

Return showing the extent of Residential Treatment and Observation during the year in Institutions (other than Poor Law Institutions) approved for the treatment of Tuberculosis.

		In Institu- tions on Jan. 1st.	Admitted during the year	Discharged during the year	Died in the Institu- tions	In Institu- tions on Dec. 31st.
	Adult males	_	1	1	_	_
r of doubtfully culous cases { ed for observation.	Adult females	_	_	_	_	_
ed for observation.	Children				_	_
	Total	_	1	1	-	_
	Adult males	23	49	42	3	27
r of patients g from pulmonary { losis	Adult females	15	34	35	4	10
110515	Children	_	4	2	_	2
	Total	38	87	79	7	39
	Adult males	7	4	9	_ !	2
r of patients g from Non- \ ary tuberculosis	Adult females	. 6	8	9	1	4
ary tuberculosis	Children	6	3	4	_	5
	Total	19	15	22	1	11
GRAND TOTAL		57	103	102	8	50

SUPPLEMENTARY RETURN. TUBERCULOSIS. FORM T.145. SECTION D.

Return showing the extent of Residential Treatment provided during the year 1934 in the Municipal General Hospital, Burnley, for tuberculous persons chargeable to the Burnley County Borough.

		In Institution on 1st January, 1934	Admitted during the year	Discharged during the year	Died in the Institution	In Institution Died in the on 31st Institution December, 1934
Number of doubtfully tuberculous cases admitted for observation	Adult males Adult females Children (under 15)					
	Total					
Number of patients suffering from Pulmonary Tuberculosis admitted for treatment	Adult males Adult females Children (under 15)		15 7	6 4	6 1 1	
	Total	ಣ	23	13	∞	5
Number of patients suffering from Non-Pulmonary Tuberculosis admitted for treatment	Adult males Adult females Children	es	4 G G	£ 6 4	e1 -	
	TOTAL	4	19	18	တ	c1
	GRAND TOTAL	7	42	31	ΪÌ	7

Return showing the immediate results of treatment of definitely tuberculous patients discharged during the year from Institutions approved for the treatment of Tuberculosis.

	_																
				Du	ratio	n of l	Resid	entia	l Tre	atme	nt in	the 1	lnstit	ution	ι.		
Condition at time of discharge.				t's but 8 days	3—	-6 mo	nths	6	12mc	onths		re tha	an 12 hs		Total	ls	Grand Totals
or discharge.		М.	F.	Ch.	Μ.	F.	Ch.	М.	F.	Ch.	Μ.	F.	Ch.	Μ.	F.	Ch.	
Quiescent		1	(<u>-</u>	_	4	2		2	1		_	_	_	7	3	_	10
Not Quiescent	٠.	1	1	1	1	1	_	1		_	1	_	_	4	2	1	7
Died in Institution .		-	1		_	_					_		-		1	-	1
Quiescent			_			_		2	1		-		_	2	1	-	3
Not Quiescent		1	3	1	1	1		1	4	_	_	1		3	9	1	13
Died in Institution .		_	-		_	_	_		_	_	-	-			-	-	_
Quiescent			_	_	_	1		_			1	_	_	1	1	_	2
Not Quiescent		3	4		4	1	_	6	3	_		2		13	10	-	23
Died in Institution .					_	_			1	-	_	_	_		1		1
Quiescent		_	_	_	_		_	1	_	_	_	_	_	1	_		1
Not Quiescent	[3		_	1	6	-	2	1		2	-	_	8	7	—	15
Died in Institution		1	1		1	I	_	-			_		_	2	2		4
Totals (Pulmonary)		10	10	2	12	13	-	15	11		4	3	-	41	37	2	80

			_															
ation	ion to ution.					Du	ratio	n of I	Resid	entia	l Tre	atmei	nt in	the I	nstit	ution		
Classification	on admission to the Institution.	Condition at time of discharge.		Unde excee	r 3 mn ding 2	t's but 8 days	3	6 mo	nths	6	12mc	nths		e tha			Γotal	s
CI	on a	or discharge.		Μ.	F.	Ch.	М.	F.	Ch.	М.	F.	Ch.	М.	F.	Ch.	М.	F.	Ch.
	nnd s.	Quiescent			1	1	1	_	_	5		_	_	2	2	6	3	3
	Bones and Joints.	Not Quiescent		_	_	1		_		_	_		-	_	-	_	_	1
	Boy	Died in Institution			_	_	-	-	_	_		-					-	
TUBERCULOSIS.	lal.	Quiescent		_		_	_	_	_	_	_			_	_	_	_	_
RCUI	Abdominal.	Not Quiescent		_	_	_	1		_	-	1	_	_	_	_	1	i	-
	1	Died in Institution		-	_	_	_		_			_	_	-	_		-)	
NON-PULMONARY	ans.	Quiescent		_	_				_	_					_	_		_
ULN	Org	Not Quiescent			ı	_		-	_		i	_	-1		_	-	2	
Non-P	Other Organs.	Died in Institution		_		_	_		_	_			-	-	_	-	-	
	ral s.	Quiescent		_		_	_	_	_	_			-	_	_	_	-	_
	Peripheral Glands.	Not Quiescent			_	_	_	_	_	-	_	_	-1		-		-	-
	Per	Died in Institution		_	_	_	_	_	_		-	_	-	-		-	-	
		Totals (Non-Pulmonary		_	2	2	2			5	2	_	-	2	2	7	6	4

(G) Supplementary return showing the immediate results of treatment of definitely tuberculous patients discharged during the year from the Municipal General Hospital, Burnley.

tion.						Dura	tion o	of Re	siden	tial T	reati	nent	in th	e Ins	tituti	on.		
Institution	Condition at time of discharge.		Under exceed	3 mn ling 2	t's but 8 days	3—6	3 mon	iths	6—1	2 mo	nths	Mor	e tha		,	Total	s	Grand Totals
the	or discharge.		М.	F.	Ch.	М.	F.	Ch.	М.	F.	Ch.	М.	F.	Ch.	М.	F.	Ch.	
	Quiescent		_		-			_		_	_	_	_	_			_	
minus.	Not quiescent		_	_					_	_	_	_	-	-	_		_	
8	Died in Institution			_	-		_		_	_	_	-	-				-	_
	Quiescent		_	_		_		· .	2	_	_	-	_	_	2	_	_	. 2
Group	Not quiescent			_		-	-	-	-	-		_	-	-	-		-	
5	Died in Institution		-	-		_	F	-	_	-	-	-		_		-		_
	Quiescent		1	_	_	_	_	_	_	_		_	_	_	1	_	_	1
Group	Not quiescent		1		_			-	1			-		_	2			2
5	Died in Institution	•••	1	-		-		F	-	_	_	-		_	1		-	1
	Quiescent	•••	_	_							_				_			
roup	Not quiescent		1	3	-		_	-	_		-	-1		_	1	3	_	4
5	Died in Institution		1	_		_		-		-	-	-3	-		1		-	1
To	TALS (pulmonary)		5	3	-	_		_	3	-	-	_	F	-	8	3	-	11

			Ļ																
ntion	ion to						Dura:	tion o	of Re	siden	tial I	reatr	nent	in th	e Ins	tituti	on.		
Classification	on admission to	Condition at time of discharge.	t e	Jnder exceed	3 mn ing 28	t's but days	3—	6 mo	nths	6	12 m	nths		e tha			Fotal	s	1
Č C	on the	or discharge.		М.	F.	Ch.	М.	F.	Ch.	M.	F.	Ch.	М.	F.	Ch.	М.	F.	Ch.	
	nd i	Quiescent		-			-	_		_	_	_	1	_	_	1			-
	Bones and Joints.	Not quiescent		-	-						_		_	_				E	-
vi		Died in Institution .		-]	-			-		_	_		1			1		F	
TUBERCULOSIS.	nal.	Quiescent		-	_	-		_	_	_	_	-	_	_		-	_		1
BER	Abdominal.	Not quiescent		_		_	_	-			_		_				_		
	Abc	Died in Institution		-	-		-	-		_	_		_	_		-		-	
Non-Pulmonary	Other Organs.	Quiescent		2	1	· .		_		_	_	_				2	1	_	-
-Pur	r Org	Not quiescent	[1				-	-			_	_		_	1	_	-
NoN	Othe	Died in Institution	[-	-	-	_	-		_	_	_	_	-	-		_	-	
	ral	Quiescent		_	_	1	_	_	_	_	_		_		_	-		1	
	Peripheral Glands.	Not quiescent			_	_	-	_	_		_	_		_	_	_		F	
	Per	Died in Institution		_	-	-	-	_	_	_	_		_	_	_	_			
	T	otals (non-pulmonary)	1	2	2	1	-	_	-	_			2	-		4	2	1	

PULMONARY TUBERCULOSIS.

Form T. 145A

Supplementary Annual Return showing in summary form (a) the condition at the end of 1934 of all patients remaining on the Dispensary Register; and (b) the reasons for the removal of all cases written off the Register. The Table is arranged according to the years in which the patients were first entered on the Dispensary Register as definite cases of pulmonary tuberculosis, and their classification at that time.

				0 1920			926			192				928			199				1930	de me est		193				1932	2			933			193	
endrich ar the time		inus	Class	T.B	inus	Clas	s T.E	3.+	snui Ci	ass T	C.B	inus (c	Cla	ss T	B.+	inus	Class	T.B.	+ (:	Cla	$\frac{\text{as T}}{ }$	B. +	inus	Class	T.B	3.+	sn ui	lass T	∴ B. ⊣	inus	Class	s T.]	B.+	inns	lass	T.H
record made during to which the Re relates		ss T.B. m	ap 1 ap 2	up 3 al (Class gr b	a. B. plus St T.B. m	tup I	ay 2 4 da - 2	al (Class T.B. plus	ss T.B. m	up 2	al (Class	ss T.B. m	up 1	up 2 up 3	al (Class T.B. plus	ss T.B. m	up 1	up 3 al (Class	T.B. plus	up 1	up 2 up 3	al (Class T.B. plus	ss T.B. m	up 1 up 2	up 3	aı (Class T.B. plus	ss T.B. m up 1	up 2	al (Class	ss T.B. m	up 1 up 2	g dn	al (Class T.B. plus	ss T.B. m	up 2	up 3
		Clas	<u>5</u> 5	Gro Tota	Clas	5 5	G 5	Lot	Clas Gro	Gro	Tot	Clas	Gro	25	Tot	Clas	Gro	Gro	15	Gra	Gro	Tot	Clas	S S	Gro	TOT	Clas	Gro	Tot	Clas	Gro	Gro	Tot	Clas	Gro	Gro
	Adults —	4	1 1		2		1 — 	1			_				1				$\frac{2}{4}$	$\begin{bmatrix} 2 & 1 \\ - & \end{bmatrix}$	_ _ _	2	1	$\begin{vmatrix} 2 & 3 \\ - & - \end{vmatrix}$		5	$\frac{2}{-}$		_						<u> </u>	
Isease Arrested	F.	1 -			- -			-			_	-		1-	1	2	$2 \mid 1 \mid$	1	4	7	3	3	$2 \Big -$	- 1		1	1		- 1							
	Children	_	1	1 2	2							- 1				1-			-	1-						_	1		-							
	-M.	1	3 3		s —	1	= - = 2,	3	4	1	- 5	j		$\begin{bmatrix} -1 \\ 2 \end{bmatrix}$	3		$\begin{vmatrix} - & - \\ - & 2 \end{vmatrix}$		2 –	- 1	$\begin{vmatrix} - \\ 2 \end{vmatrix}$	3	3	$\begin{bmatrix} - \\ 3 \end{bmatrix}$	3	7	8 3	7 :	3 13	7	8 7	4	19	10	5 11	3
însease not Arrested	Adults - F.	,)	1 1		2. 1					1-		1		3	4		2		2	$1 \begin{vmatrix} -1 \\ 2 \end{vmatrix}$	2	4	2	$\begin{bmatrix} - \\ 2 \end{bmatrix}$	_ -	4	$\frac{1}{9}$ 5	3 4	1 12	2	2 4		6	3	7 6	
. acar in the contract		_							-		-		-	_					+		_								-	1	-	-				
	Children															<u> </u> -						1												3	1	
néimm not escertair e par	ned during	_			-			_				-			_				- -							_							_			
izi in Dispensary F In December	Register at	8	5 6	3 1	4 1	. 1	3 —	4	4	3-		7 2	1	7 1	9	5	5 4	1 1	0 1	1 4	9	13	8	7 6	4	17	21 8		26	9 1	.0 11	4	25	16 13	3 17	6
	~M.	29	6 4	_ 1	0 7	1	2-	3	4 .			1 6	3 1		1	4-			-																	
Distilatged as	Adults F.	23		1 1	0 5	5 —.	1	1	3 ₁	- 		1 7	7 1 -		1	5-	_ 3		3													-				
Recovered	Children		2 1		3 1	-,- -				- -				_											_											
												_	<u>-</u>	_ _					-						-		_	. _ 			_	<u> </u>				_
the light of or other. The Department, Regis	ster	167	24 25	6 5	5 20	3 4	9 —	13	15	4 4-		8 22	2 2	7	9	12	2 2		4 1	4 2	8	10	5	$1 \begin{vmatrix} 1 \end{vmatrix}$	2	4	12 3	3 4	10	4	3	-	3	1		1
	ζМ.	13	15 35	10 6	0 8	8 3	9 1	13	6	5 13	$\begin{vmatrix} 2 \\ 2 \end{vmatrix}$	0 2	$\begin{bmatrix} -1 \\ 2 \end{bmatrix}$	$\begin{vmatrix} -1 \\ 9 \end{vmatrix}$	15	3	4 9	8 2	1	1 7	12 5	24	3	$\begin{bmatrix} - \\ 1 \end{bmatrix}$	8	16	6 3	7 8	8 18	5-		6	7	2	1	4
Der	Adults - — . F.	11	7 18	3 2 2	27	-!	10 1	12	4_	- 8	$\frac{}{3}$ $\frac{}{1}$	1 3	3 3	8 5	16	$\frac{1}{2}$	$\frac{1}{2}$ $\frac{10}{10}$	6 1	8	$\frac{1}{2}$	10 8	17	8	$\begin{vmatrix} - & - \\ 3 & 2 \end{vmatrix}$	4	9	$\begin{array}{c c} - & - \\ 2 & 2 \end{array}$	5 6	5 12		1 5	4	10	1 2	2 -	1
		-		2			_									-			-	_									1							
~	Children	3					1.					1				,																				
Printer off Dis				0 19 16							'									احداد								_ا_		='		- -				-
SALD TOTALS		223	63 9	62218	$81 \int_{5}$	2 10	35 2	47	$ _{33} _{1}$	5 28	6^{t} 4	9 4	3 10	31 10	51	32	13 28	15	56 2	8 15	39,10	64	241	$2 _{16}$	18	46	41 16	$ 27 _{24}$	4 67	118	4 17	14	45	20 1	5 18	12



NON-PULMONARY TUBERCULOSIS.

Supplementary Annual Return showing in summary form (a) the conditions at the end of 1934 of all Patients remaining on the Dispensary Register; and (b) the reasons for removal of all cases written off the Register.

			Previou	us to	1926		1926			1927			192	S			1929			193	30		19	31			1932	2	1	19	33			1934	
	to which the Re	the year	Bones and Joints Abdominal Other Organs	Peripheral Glands	Total	Boncs and Joints Abdominal	Other Organs Peripheral Glands	Total	Bones and Joints Abdominal	Other Organs Peripheral Glands		Bones and Joints Abdominal	(0)	Feripheral Glands Total	Bones and Toints	ominal	Other Organs Peripheral Glands	Total	Bones and Joints	Organs	Peripheral Glands Total	Bones and Joints	Abdominal Other Organs	Peripheral Glands	ľ	Bones and Joints Abdominal	Other Organs Peripheral Glands		Bones and Joints	Abdominal Other Organs	Peripheral Glands		Bones and Joints Abdominal	Other Organs Peripheral Glands	Total
	Disease Arrested	Adults ~ — F.			2						1					1 -		2		- '					2	$\begin{bmatrix} - & 2 \\ - & 2 \end{bmatrix}$		$\begin{bmatrix} 2 \\ 6 \end{bmatrix}$	5	$\begin{array}{c c} 1 & 1 \\ \hline 2 & 1 \end{array}$	1	8			3 5
7	and the first to be a second of the second o	Children	01										1			1	+ 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	1	1_		2 4	1_		3	5	2 1		$\frac{11}{2}$				7	2		9
		-M.						.)					<u> </u>			1		1								3 1		4	1		0		<u> </u>		
1 111		Adults - —					2	9			1			_ 1							_				_				1 -			1			5
1 5 1	Disease not Arrested	F.			<u> </u>		3	ა 			1						1								_			$-\frac{5}{-}$	4 -	$- \begin{vmatrix} 4 \\ - \end{vmatrix}$		9		$-\begin{vmatrix} 1 & 2 \\ -\end{vmatrix}$	2 3
11 111 111		Childreu		. l	3						1							^				1 -	$ \begin{bmatrix} 2 \\ - \end{bmatrix}$		3]		$\begin{vmatrix} 2 \\ - \end{vmatrix}$	6	3 	_ 7 _ -	10
(a) 1844 1844	Otnition not ascertain	ned during		_	_																				_										_
	Total on Dispensary R	legister at	3— 6	3 2	11	<u> </u>	4_	5	_ 1	2	- 3	1-		- 1		3 -	2	5	1-	- 1	2	3	1 3	3	10	7 4	6 8	26	13	6 7	10	36	6 2	5 15	28
	Transierrei to Pulmon	zry	1 1—	- 1	3			2					1	- 1				_							-		1	1							
			3 4 4	8	19		3 _	3		1 2	3				-	- 1	_	l		1	1 2	3	1—		4										
	Discharged as	Adults 2 — F.	6 2 8	3 21	37	,	5	5	- - 1	3	4		-' - -i	4 5	5 2	$\begin{vmatrix} 2 & 3 \end{vmatrix}$	1—	6		1 —	$\begin{array}{c c} \hline 1 & 2 \end{array}$				_										
	Recovered	Children	20 13	4 35	72	- 1	2 7	10	4. 3		13	4_		5, 9) :	$\begin{bmatrix} - \\ 3 \end{bmatrix}$		5	1		0 11	1	1 1	3	6										
, , , ,	List dight oi, or other The Dispersary Regis	wise removed ster	28 16 16	3 56	116	2 1	7 18	28	9 5	6 15	35	5 (3 1	.0 24		5 2	10	17	3	$egin{array}{cccccccccccccccccccccccccccccccccccc$	3 21		1 1	6	8	4 1	3 4	12			3	4			
-	-		2 3	l 1	4	1	1	2		1	1				-			_	1 -		1	1			1	1 —		2	1			1 -			
•	Ded	Adults / — F.	1 1	1 2	5		1-	1		3	4			1 2	2	1		1							_	3 1		4							
		Children	2	1 1	4	2 1		4	1 2	2 1 -	4	1	1	1 3	} :	2		2			$ {2}$				1	1	1 -	2				_			
:	Total viction off Disp	ensary	60 38 3	5 124	257	4 4	1431	53	15 1	1 13 2	64	11	7 4 2	21 43	3].	3 7	1 11	32	5	6 3	25 39	5	3 3	9	20	9 2	4 5	20	1		3	5 -			
,	SEATU TOTALE Of (a) SELECTION THOSE TRANS	and (b) ferred to	63 38 4	1 126	268	4 :	5 18 31	58	15 15	2 15 2	67	12	7 4	21 44	1	6 7	3 11	37	6	$\begin{bmatrix} 6 & 4 \end{bmatrix}$	27 43	8	4 6	12	30	16 6	10 14	46	14	6 8	13 4	11	6 2	5 15	28



APPENDIX 9.

RETURN to be made on or before the 9th of February, 1935, by Mr. H. V. Hartley, Vaccination Officer of the Burnley Registration District, respecting the Vaccination of Children whose Births were registered from 1st January to 31st December, 1933, inclusive.

Number of	Declarations of Consciention Objection received by the Vaccination Officer irrespective	of birth of the children to which they relate, during the Calendar Year 1934.	13	572 238	810
	Total number of Certificates and copies of Certificates of Successful Primary	vaccharlon of Children under 14 received during the Calendar Year 1934.	13	240 124	364
Number of these Births remaining on 31st January, 100st 2014.	1935, itelated duly entered in the "Vaccination Register" (colums 3, 4, 5, 6 and 7 of this Return)	not remporar- ily accounted for in the "Report Book" (columns 8, 9 and 10 of this Return).	11	o₁	3
Births nuary, un- e ister " hown c") of	Removal to places unknown,	our which cannot be reached, and Cases not hav- ing been found.	10	67 -	3
Number of these Births which on 31st January, 1935, remained unentered in the "Vaccination Register" on account (as shown by "Report Book") of	Removal to Districts	Vaccination Officers of which have been duly apprised.	6	4	4
Numbo which 1935 et ". Vacc on ac		Postpone- ment by Medical Certi- ficate.	œ	1 2	3
ed by ., II., Regis-	Col V.	Died Unvac- cinated.	7	47	64
Number of these Births duly entered by 31st January, 1935, in Columns I., II., IV. and V. of the "Vaccination Register" (Birth List Sheets), viz.:	Col. IV. Number in respect of whom Statu- tory	tions of Conscient tions scientions tions Objection have been	received.	588 239	827
se Births 1935, in the " I h List	ii	Had Small Pox.	ರ	1 1	*
an of the anuary, and V. of r. (Birt	Col. II	Insus- ceptible of Vac- cination.	4		2
Number of 31st Januar IV. and V. ter" (1	Col. I.	Success-fully Vaccin-ated.	က	207	291
	Number of Births returned in the "Births	Sheets "as registered from 1st Jan., to 31st Dec., 1933.	ତା	852 345	1197
	Registration Sub-Districts	comprised in the Vaccination Officer's District.	1	EAST WARD WEST WARD	Total

Children successfully vaccinated after the declaration of conscientious objection had been made (included in column 6 above)—0.

Total number of copies of certificates for the year 1934 sent to other Vaccination Officers (included in column 12 above)—7.

Table showing the Medical Examinations carried out during the year 1934 for the various Corporation Departments, etc.

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			496



COUNTY BOROUGH OF BURNLEY.

Local Education Authority.

MEDICAL OFFICER'S REPORT

1934

D. C. LAMONT, M.B., Ch.B., D.P.H.,
School Medical Officer.

THE EDUCATION COMMITTEE

FOR THE MUNICIPAL YEAR 1934-35

IS CONSTITUTED AS FOLLOWS:-

- *HIS WORSHIP THE MAYOR (COUNCILLOR J. H. HEAP).
- *ALDERMAN H. LEES, J.P., Chairman.
- *COUNCILLOR L. RIPPON, Vice-Chairman.
- *ALDERMAN W. BUCHANAN.
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REV. J. W. TOWNSEND.

^{*} Members of the Special Services Sub-Committee.

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Public Health Department, Burnley,

March, 1935.

TO THE CHAIRMAN AND MEMBERS OF THE EDUCATION COMMITTEE.

SIR, LADIES AND GENTLEMEN,

I have the honour to present my report on the work of the School Medical Service for the year 1934. The report is drawn up in accordance with the suggestions of the Board of Education. It has necessarily to contain many statistical details. Those relating to inspection and treatment embodied in the context give combined figures for all the elementary and special schools. The statistical appendices, as required by the Board of Education, differentiate between elementary and secondary schools and Appendix II summarises the findings of medical inspection in both types of schools.

The defects found during routine inspections in the schools and the extent to which treatment was given varies little from that of the previous year. On surveying the physical condition of the school children as a whole one is impressed by two things. Firstly, although the general physique of many scholars leaves much to be desired, there is no definite evidence of deterioration resulting from the prolonged local trade depression. Amongst the agencies contributing to this satisfactory finding are the comprehensive schemes for the provision of meals and the Hest Bank Camp School. Secondly the marked deformities resulting from infantile rickets, so frequently seen in adults, are rarities among the child population.

The scheme for the provision of milk in schools has paved the way for a new era in milk consumption. It is pleasing to find that, within three months of the inauguration of the scheme, about 69% of the school children were receiving a daily ration of fresh milk in school.

The year under review was characterised by two epidemics of infectious disease. In January Scarlet Fever was widespread and during the last quarter Diphtheria, although localised in a portion of the town, had a high incidence and was extremely virulent.

In several previous reports I dealt in detail with the difficulties under which dental inspection and treatment were being conducted. The appointment of an additional school dentist, who took up duties in November, has enabled the dental scheme to be organised on lines which will more adequately fulfil the purpose for which it was established. Already the amount of conservative treatment has shown a marked increase, the interval between dental inspection and treatment is shortened to a few days, frequent anæsthetic sessions are held and each child is inspected on its entrance into school. By a rearrangement of the clerical work, it has been possible to have a clerk-attendant for each dentist and the qualified nurse previously attached to the dental clinic has been able to allocate more time to the medical clinics, following-up, etc.

The School Medical Service is gradually being more closely linked up to the other municipal health services. The number of young children referred from the infant welfare centres for treatment at the school clinic has shown an increase. The special medical services, such as X-Ray examinations, light treatment and operative treatment for enlarged tonsils and adenoids, available at the Municipal Hospital are now utilised for children referred from the School Clinic.

Alterations to the clinic premises were completed early in the year and the additional floor came into use in April, to house minor ailments, ophthalmic and advisory clinics. The additional accommodation has eased considerably the congestion previously experienced.

I wish to acknowledge my thanks to the Director of Education for his co-operation and to the school medical staff for their efforts to make the work effective.

My thanks are also due to you for your courtesy and support during the year.

1 am, Sir, Ladies and Gentlemen,

Your obedient Servant,

D. C. LAMONT, School Medical Officer.

GENERAL INFORMATION.

SCHOLARS.

Number of Elementary and Special School Children on roll on the 31st December, 1934, 12,524. Average attendance during year, 11,393.

TEACHERS.—Elementary and Special Schools.

Men, 91; Women, 293. Total, 384.

SCHOOLS.

Elementary.

Number of Council Schools		 16
Number of Non-Provided Schools		 13
Number of Departments in charge	of	

Head Teacher:-

Mixed only	 	 16
Boys only	 	 2
Girls only	 	 2
Mixed and Infants	 	 7
Infants only	 	 20

Secondary.

The Grammar School for Boys The High School for Girls.

Special Schools 6

School for the Blind and partially blind, School for the Deaf, the Open Air School, 2 Schools for Mentally Defective children and Nursery School.

SCHOOL CLINIC.

The School Clinic premises in Elizabeth Street have the following accommodation:—

On the ground floor, a dental waiting room, two dental treatment rooms and small office. The Tuberculosis Dispensary consulting room and waiting room are also on this floor.

In the basement, a large room used for orthopædic treatment and remedial exercises.

On the first floor, a large waiting room, office, three consulting rooms, treatment room, dark room and nurses' room.

The total number of attendances of school and pre-school children at the various clinics was 48,778.

The School Clinic was open on 308 days.

LIST OF SCHOOL CLINICS.

NAME.	Purposes.		Where Held.	Times.
Inspection Clinic.	Special examination of cases referred by Teachers, Attendance Officers and School Nurses.		Elizabeth Street.	Monday, 2-0 p.m. Tuesday, 9-30 a.m. Wednesday, 2-0 p.m. Thursday, 9-30 a.m.
Dental Clinic.	Dental Treatment.		Elizabeth Street.	Every Week-day by appointment.
Ophthalmic Clinic.	Prescription of Spectacles.		Elizabeth Street.	By appointment only.
Nose and Throat Clinic.	Examination by Specialist Officer of Children suffering from Enlarged Tonsils and/or Adenoids.		Elizabeth Street.	Arranged as required.
Nose and Throat Clinic.	Operative Treatment of Adenoids and Enlarged Tonsils.	•••	Municipal General Hospital.	Arranged as required.
Orthopædic Clinic.	Treatment of Crippling and Deformities.	•••	Elizabeth Street.	Treatment by Ortho- pædic Nurse daily by appointment. Orthopædic Surgeon attends twice each month.
Minor Ailments Clinic.	Treatment of Minor Diseases of Skin, etc.	•••	Elizabeth Street.	Every Week-day at 8-45 a.m.
Ultra-Violet Light Clinic.	Treatment of Debilitated Children, etc.		Bank Hall Children's Hospital.	Wednesday and Friday at 9-30 a.m.
Diplitheria Immunisation.	Prophylactic Inoculation against Diphtheria.		Elizabeth Street.	Wednesday, 3 p.m.
Cleansing Station.	Treatment of Scabies and Cleansing of Verminous Cases.	•••	Basket Street.	Arranged as required.

REPORT

STAFF OF THE SCHOOL MEDICAL SERVICE.

Medical Officer of Health and School Medical Officer:— D. C. LAMONT, M.B., Ch.B., D.P.H.

Assistant School Medical Officers:—
M. C. R. Grahame, M.B., Ch.B., D.P.H.
ELSIE CATLOW, M.B., Ch.B., B.Sc., D.P.H.
MARGARET S. L. McCash, M.D.

School Dentists:—
HENRY A. BOLTON, L.D.S.
ANNIE M. KEAN, L.D.S.

Ophthalmic Surgeon (part-time):—
T. SNOWBALL, M.A., M.B., Ch.B.

Four Health Visitor-School Nurses. Three Clerks. Two Dental Clerk-Attendants.

The School Medical Officer undertakes chiefly the administrative duties connected with the School Medical Service. He is also responsible for certifying mentally defective children for admission to Special Schools. The Deputy Medical Officer examines all children recommended for admission to the Open Air School, arranges for their admission, and is responsible for the clinical supervision of the children in attendance at the Open Air School. He also carries out the routine inspection of Secondary School boys.

One of the Lady Assistant Medical Officers is wholly occupied in the work of the School Medical Department, but relieves the other Assistant Medical Officers during holidays. The Second Lady Assistant Medical Officer carries out chiefly Maternity and Child Welfare work, but is occupied on school medical work for two sessions per week.

The part-time Ophthalmic Surgeon holds two sessions per week for the examination and following-up of school children suffering from eye diseases and vision defects. Additional sessions are held as required.

The time of the two whole-time Dental Surgeons is allocated as follows:—21 sessions per week to dental inspection and treatment of school children; one session per week to treatment of pregnant and nursing mothers and children of pre-school age; one evening session per week to the treatment of tuberculous persons.

CO-ORDINATION WITH OTHER HEALTH SERVICES.

All the records kept by the Maternity and Child Welfare Department pertaining to individual children are passed to the school clinic office when children enter school, and are filed along with the school medical records. The examining medical officer, therefore, has the complete records of each child from birth.

At the end of each term, information, in the form of advice from the medical officer, as to the type of employment unsuitable for the particular child, is transmitted to the Juvenile Employment Committee in respect of children who have left school at the end of the term.

Increasing use is being made of the facilities available at the school clinic for the treatment of children of pre-school age. The child welfare medical officer and occasionally private medical practitioners refer children under 5 years of age for treatment of minor ailments, eye, nose and throat, dental and orthopædic defects, etc. There is an arrangement whereby children may be referred from the infant welfare centres and school clinics to the Municipal General Hospital for X-Ray examinations and for the diagnosis of ringworm by Wood's Glass.

THE SCHOOL MEDICAL SERVICE IN RELATION TO THE PUBLIC ELEMENTARY SCHOOLS.

School Hygiene and Sanitary Accommodation.—School buildings have been inspected regularly, particular attention being paid to ventilation and cleanliness of cloakrooms and lavatories. In all the schools it has been found that the teachers give considerable attention to adequate ventilation by open windows. The majority of cloakrooms and lavatories have been maintained in a satisfactory state of cleanliness and the periodic repainting of the schools in pleasant colourings has done much to relieve the drabness of some of the older school buildings.

In my report for 1931, I gave in detail the numbers and types of sanitary conveniences in the schools and commented adversely on the system of trough closets in use in three schools. Since then improvements have been effected

in one school, but in Back Lane and Red Lion Street schools there still remain closets which are thoroughly insanitary. These are of the trough type, which can only be evacuated of their contents when the caretaker goes round from time to time and releases a tap, which allows the closets to be flushed. In the intervals between the rounds of the caretaker faces is left to accumulate in the troughs and causes offensive effluvia. The Sanitary Authority would not approve of the installation of a closet of this type and flushed in the manner described in any new building. The types of closets in the schools and their maintenance in a hygienic condition should, for their educational value, be beyond reproach. I would, therefore, once again urge that action be taken without delay to remedy the insanitary condition of the closets in Back Lane and Red Lion Street schools.

A year ago I reported that the playground of Wood Top school was in an unsatisfactory condition, permitting the lodgment of water, and required to be paved. Again I have to report that it continues to be in the same unsatisfactory condition.

I would strongly urge that consideration be given to the use of paper towels in the school wash-places. At the present time one or two roller towels have to suffice for a large number of children. These towels for common use of the scholars form a potential danger in spreading infectious diseases. In a recent epidemic of a virulent form of diphtheria, a considerable number of carriers of the infection were found in the schools. Such carriers, by using the roller towels, are liable to spread infection. Paper towels, on the other hand would ensure a clean towel for each child, which after use could be deposited in a bin and burned in the school furnace, and help to diminish the risk of spread of infection.

It is satisfactory to report that now all ashpits attached to schools have been abolished and ashbins substituted.

Three hundred and sixty-five visits were paid by the sanitary inspectors to schools, during which the following defects were found:—

Blocked drains, gulleys an	d clos	sets					11
Defective troughing, dow	nspou	ts, dra	ins, an	d close	t struc	tures	9
Dirty urinals and closets							2
Defective litter bins							2
							24
All these defects were re	emedi	ed.					

The gradual substitution of modern types of desks and tables for the old fashioned long desks continues, 424 dual tables and 267 dual desks being installed in 1934.

MEDICAL INSPECTION IN THE SCHOOLS.

Three groups of school children have been examined in accordance with the Board of Education (Special Services) Regulations, which provides for the medical inspection of all children in public elementary schools as soon as possible in the twelve months following:—

- (a) their first admission;
- (b) their attaining the age of 8 years; and
- (c) their attaining the age of 12 years.

Each elementary school has been visited once during the year for this purpose.

Head teachers are given notice at every routine examination that they may submit any special cases not falling in the above code groups whom they desire the Medical Officer to see.

All children in the code groups and special cases who have a defect requiring treatment or are to be kept under observation, are re-examined at the schools after a suitable interval has elapsed.

The following table shows the number of children inspected under the various groups during the year, with a comparison for 1933. There was a decrease in the number of children in each age group, the total number who were presented for routine inspection being 608 less than in 1933.

Code Groups.

			Total	Total
Entrants:	Boys	Girls	1934	1933
Age 3 years	41	 46	 87	 61
,, 4 ,,	169	 144	 313	 289
,, 5 ,,	278	 288	 566	 659
,, 6 ,,	79	 83	 162	 177
,, 7 ,,	33	 20	 53	 41
	600	 581	 1181	 1227
	—			
			Total	Total
Intermediates:	Boys	Girls	1934	1933
Age 8 years	507	 523	 1030	 1087
,, 9 ,,	75	 64	 139	 211
	582	 587	 1169	 1298

					Total		Total
Leavers:	Boys		Girls		1934		1933
Age 12 years	555		517		1072		1345
,, 13 ,,	67		62		129		288
,, 14 ,,	4		2		6		2
	626		581		1207		1635
Others	22	•••	31	•••	53		58
Total Routine Inspections	1830		1780		3610		4218
Other Inspections.							
No. of Special Inspect	ions:				1934		1933
At Schools	•••	•••			161		167
At School Clini	С	•••		•••	2804		3105
					2965	•••••	3272
No. of Do Inconstions							· · ·
No. of Re-Inspections At Schools					5298		4469
At School Clini		•••		•••	1291		1741
110 2011001 01111							
					6589		6210

Details of the numbers examined at the various Schools appear in the Appendix.

Visits of the Medical Officer.

Appended below is the number of visits paid to the Elementary Schools.

For Routine Medical Inspection: Morning 141 : Afternoon 80 = 221 For "Following-up" Defects: ,, 10 ,, 2 = 12

233

REVIEW OF THE FACTS DISCLOSED BY MEDICAL INSPECTION.

Routine and Special Inspections in the Schools.

The following is a summary of the defects found in 1934 compared with the previous year:—

the	previous year:—						
			1934			1933	
		No.		%	No.		%
1.	Total number of children						
	examined at routine and						
	special inspections	3771		_	 4385		
2.	Number of children suffering						
	from						
	Malnutrition	24		.6	 61		1.4
	Uncleanliness	267		$7 \cdot 1$	 337		7.7
	Skin Disease	206		5.5	 253		5.7
	External Eye Disease	44		1.2	 66		1.5
	Defective Vision						
	(including Squint)	547		14.5	 600		13.7
	Ear Disease	99		$2 \cdot 6$	 100		$2 \cdot 3$
	Nose and Throat Disease	672		17.8	 794		18.1
	Enlarged Glands	74		$2 \cdot 0$	 99		$2 \cdot 3$
	Defective Speech	80		2.1	 47		1.0
	Defective Teeth	2374		63.0	 2595		$59 \cdot 2$
	Heart Disease	84		$2 \cdot 2$	 134		3.0
	Anæmia	58		1.5	 55		1•3
	Lung Disease (Non-Tub.)	167		4.4	 215		4.9
	Tuberculosis:						
	Pulmonary Definite			_	 _		
	" Suspected …	_			 _		
	Non-Pulmonary	14		•4	 9		0.2
	Diseases of Nervous System	55		1.5	 77		1.8
	Deformities	198		5.3	 212		4.8
	Other Defects and Diseases	350		9.2	 399		9.1

As regards **routine** inspections, the percentage of children found to require treatment, excluding uncleanliness and dental disease, was 31·5 in the Entrants' Group, 27·2 in the Intermediate Group, and 25·1 in the Leavers' Group; the percentage for the total code groups being 27·9. These correspond closely to the figures for 1933.

A list of the defects found in the various code groups and "specials" appears in the Appendix to the report.

Uncleanliness.—Inspection by the Medical Officer revealed 267 unclean children, as against 337 in the previous year, the percentages being 7·1 and 7·7 respectively. Of this number, 245 had heads infested with vermin or nits, and 22 had dirty bodies.

The routine cleanliness surveys by the school nurses are a better guide to the conditions obtaining in the various schools.

The nurses made 136 cleanliness surveys of children in elementary and special schools, and carried out 44,621 inspections of children's heads and bodies. 510 individual children were found to be unclean. In 30 instances vermin was found, and in 2,010 instances nits were present in the hair. The percentage of children showing evidence of infestation with vermin was 0.07%. 704 notices giving advice as to the best means of getting rid of vermin and nits, were sent to parents, and where necessary, this was followed up by personal visits by the nurses to the homes. A more strongly worded notice to parents was sent on 153 occasions on which re-inspection by the nurses showed that children were still verminous. 42 verminous children were cleansed and disinfested at the Cleansing Station.

The following table, which gives the results of cleanliness surveys by the school nurses for the last twelve years, shows that there is a marked improvement during the last few years in the standard of cleanliness as measured by the presence of vermin and nits.

Year	Number of Inspections by School	Number to h		Percentage found to have			
	Nurses.	Vermin.	Nits.	Vermin.	Nits.		
1923	7132	254		3.6			
1924	6009	266	898	4.3	14.9		
1925	7070	377	1806	4.1	25.5		
1926	8014	465	965	5.8	12.0		
1927	3412	153	309	4.5	9.0		
1928	7735	231	1096	3.0	14.2		
1929	11430	123	1190	1.1	10.4		
1930	21796	103	2355	0.5	10.8		
1931	17232	183	1388	1.1	8.1		
1932	23847	69	1216	0.3	5.1		
1933	33753	51	1454	0.2	4.3		
1934	44621	30	2010	.07	4.5		

Nose and Throat Defects.—Unhealthy conditions of the Nose and Throat were recorded in 672 or 17.8% of the children examined; a decrease of 0.3% on the 1933 figures. This number includes 529 where the tonsils were enlarged (14.0%) and 40 where adenoids were present. Both conditions were found in 21 cases. There were 82 other conditions.

Tuberculosis.—During the five years 1930-34 no definite active tuberculous disease of the lungs was found in any school child during medical inspection in the schools.

At medical inspection in the schools 14 children were found to suffer from non-pulmonary forms of tuberculosis. Of these, 5 were cases of tuberculous gland disease, 5 had tuberculous lesions of the bones and joints, of which I was tuberculous hip disease, and 2 tuberculous spinal caries.

Skin Disease.—At the school examinations 206 cases of skin disease, including ringworm, were discovered, the percentage being 5.5, as compared with 5.7 last year.

The diseases noted were:—Ringworm 3, Scabies 4, Impetigo 22, Other Diseases 177.

External Eye Diseases.—44 cases of inflammatory conditions of the external eye were noted. The cases included Blepharitis 18, Conjunctivitis 10, Corneal Opacities 2, other conditions 14.

Defective Vision.—A routine vision test of all children in the Intermediate and Leaver Groups is carried out. The Entrant group, however, is not examined for visual acuity at routine examinations, as the majority do not know the letters of the alphabet. If defective vision is suspected in entrants, special vision test cards are used.

The total number of children medically inspected in the schools who were found to have defective vision during the year was 547 (including 70 with squint). Of these 239 were in the Intermediate age group (aged 8 and 9 years), and 205 in the Leavers group. In addition, 226 children had errors of vision corrected previously and were wearing suitable glasses—there being 14 Entrants, 58 Intermediates, 150 Leavers and 4 not coming under the code groups.

In 293 cases the defective vision or squint was sufficiently severe as to necessitate their being referred to the Ophthalmic Specialist Officer. The remaining 254 were kept under observation.

In previous reports I have commented on the large number of children who were found not to be wearing the spectacles provided for them. The

school nurses now make periodic surveys in the schools to find children who neglect to wear their spectacles, and this is followed up by visits to the homes of the delinquents, when the importance of wearing spectacles regularly is impressed upon parents. Many of the headteachers have been helpful in noting which scholars come to school frequently without their spectacles and in referring cases to the clinic for repair or replacement of broken spectacles. Despite these efforts, the number of instances in which children, who have been supplied with spectacles, neglect to wear them is very high. This is due, in no small measure, to indifference on the part of parents and, not infrequently, to lack of parental control. The school nurses found that of 896 children who had been supplied previously with spectacles, 145 were not wearing them in school. In 87 instances this was due to carelessness or neglect to take the spectacles to school and in 58 the spectacles were lost or broken. All lost and broken spectacles were replaced.

In previous years it was found that in many instances, in which the children complained that the spectacles did not suit them, the frames had become bent or the lenses, having dropped out, were replaced in the wrong axis. All spectacles supplied during the last year through the Education Committee's Scheme have steel frames and the lenses slightly flattened at the top, and are found to be more suitable for the rough usage to which they are frequently subjected.

The types of vision defect found by the Ophthalmic Surgeon are described elsewhere in this report.

Ear Disease and Hearing.—99, or 2.6% of the children inspected in the schools suffered from ear disease, and of these only 52 had any appreciable degree of deafness. Children with ear disease, especially chronic otorrhoea, are usually first ascertained when they present themselves at the school clinic for treatment. Reference to the following pages shows that such cases comprise 7.8°_{0} of the children examined at the clinic. There has been little variation in recent years in the percentage of children who are found to suffer from middle ear disease.

Deformities and Crippling Defects.—198, or 5.3% of the children inspected in school during 1934 suffered from postural defects or deformities. These are mainly defects of posture, which require remedial exercises for their correction. Comparatively few instances of gross deformity requiring operative treatment are found in the schools. Deformities attributable to rickets are generally minor degrees of knock-knee or bowing of the legs. Severe paralytic lesions, due to injuries at birth or infantile paralysis, are few in number.

Particulars of the Orthopædic Scheme and the treatment and after-care of crippling defects for the year are given on pages 33 to 39,

Defective Speech.—Special attention was paid during the last few years to the incidence of speech defects, particularly stammer. In 1934, 80 children were found with abnormal articulation or stammer. Children who stammered were classified according to the severity of the defect and referred to the special remedial centre, which was established in January. Further details regarding the centre are given on pages 54 to 56.

Diseases of the Heart and Circulation.—These are classified under the headings Organic Disease, Functional Disease and Anæmia.

The incidence of heart affections showed a decrease compared with that of the previous year. 24 children were found to have organic heart lesions, equivalent to 0.6% of the total inspected, as compared with 0.7% in 1933. The cases of functional heart disease amounted to 60, being 1.6% of the total inspected, as compared with 2.3% in 1933.

There were 58 cases of anæmia.

Clothing and Footgear.—Children found to be insufficiently clad or to have defective footgear numbered 51, equivalent to 1.4% of the total inspected. Only 5 children had dirty clothing, necessitating notices to parents. All children with defective footgear were reported to the Clog Fund Sub-Committee for investigation of their family circumstances and the provision of clogs in cases which were found to be necessitous.

Height and Weight.—The following table shows the averages compared with 1933 of the children medically inspected.

Average Height and Weight of Children Age 5 Years.

	Boys	Boys		Girls	Girls
	1933	1934		1933	1934
Number Inspected	353	 278	 	306	 288
Average Height in inches	42.7	 42.6	 	42.0	 41.9
Average Weight in pounds	40.5	 41.6	 	39.3	 38.9

Average Height and Weight of Children Age 8 Years.

	Boys	Boys		Girls	Girls
	1933	1934		1933	1934
Number Inspected	531	 507	 	556	 523
Average Height in inches	48.6	 48.7	 	48.5	 48.5
Average Weight in pounds	54.0	 54.1	 	$52 \cdot 9$	 $52 \cdot 4$

Average Height and Weight of Children Age 12 Years.

	Boys	Boys		Girls	Girls
	1933	1934		1933	1934
Number Inspected	682	 555	 	663	 517
Average Height in inches	55.8	 55.6	 	56.7	 56.9
Average Weight in pounds	76.7	 75.4	 	77.8	 75.5

Malnutrition.—During 1934, 26 children were found to be malnourished. In my report for 1933, I commented on the facts that during the three years 1931 to 1933 there appeared to be a gradual increase in the number of children found to be malnourished and that in 1933 the incidence was double that of 1932. In view of these facts, particular attention was paid during 1934 to the state of nutrition of children examined both in school and in the clinic. The same medical officer examined the children and assessed the nutrition on the same basis as in previous years.

Year	1929	1930	1931	1932	1933	1934
Total number of school children inspected (routine and special).	7874	7795	7282	7122	7490	6575
Number found to be suffering from malnutrition	11	4	23	29	64	26
Incidence rate per 1000 children inspected	1.4	0.5	3.1	4.1	8.5	4.0

It is gratifying to find that the increased incidence of the previous year was not sustained during 1934, but had fallen to the level of 1932. Careful enquiries were made into home conditions, whether the parents were unemployed, whether the children were receiving sufficient food of proper nutritive quality and sufficiency of sleep. No definite relationship between malnutrition and unemployment was established but, whereas food was sufficient in quantity, there was reason to believe that it was not sufficiently varied to give an adequate vitamin content, and most cases lacked sufficient sleep.

The degree of nutrition of children examined in the three routine age groups is now being classified, in accordance with the Board of Education Memorandum No. 124, under the headings "Excellent, Normal, Slightly Subnormal and Bad."

THE INSPECTION CLINIC.

Inspection Clinics are held at the School Clinic on Monday afternoon, Tuesday morning, Wednesday afternoon, Thursday morning. Cases for special investigation are examined on Saturday morning.

To this clinic children absent on account of sickness, who have not been certified by private medical practitioners as unfit to attend school are sent by the attendance officers. The Assistant Medical Officer also examines children sent by the teachers when they want advice as to the condition of the child which does not allow of waiting until the Medical Officer next visits the school. Children are also referred for examination by parents and school nurses. Consultations with parents are held regarding defects found in the course of routine medical inspection. The Assistant Medical Officer reviews from time to time cases undergoing daily treatment by the school nurses for minor ailments.

In this way practically the whole of the children who are suffering from any ailment are kept under constant supervision. In some cases private medical practitioners refer children to the Clinic.

During the year 2,932 children attended the Inspection Clinic.

2,377 of the inspected children had defects of a minor nature that exclusion from school was not necessary, but in 555 cases certificates of exclusion from school for varying periods were granted.

The following is a summary of the defects found in elementary and special school children attending the inspection clinic:—

Malnutrition 2 — Uncleanliness 78 — Ringworm 49 — Impetigo 147 — Scabies 24 — Other Skin Diseases 156 1 Eye Defects 488 6 Ear Defects 220 9 Nose and Throat Defects 211 42 Enlarged Cervical Glands (Non-Tuberculous) 61 6
Ringworm 49 Impetigo 147 Scabies 24 Other Skin Diseases 156 1 Eye Defects 488 6 Ear Defects 220 9 Nose and Throat Defects 211 42
Impetigo
Scabies <
Other Skin Diseases 156 1 Eye Defects 488 6 Ear Defects 220 9 Nose and Throat Defects 211 42
Eye Defects 488 6 Ear Defects 220 9 Nose and Throat Defects 211 42
Ear Defects 220 9 Nose and Throat Defects 211 42
Nose and Throat Defects 211 42
Trobe and Time at 2 creeks
Enlarged Corvical Glands (Non-Tuberculous) 61 6
Enlarged Cervical Glands (Non-Tuberculous) 01 0
Defective Speech 32 5
Defective Teeth 26 —
Heart Disease 41 8
Anæmia 36 2
Respiratory Diseases 83 2
Deformities 37 4
Nervous Diseases 39 1

						F	Requiring to be
					Requiring		kept under
					Treatment.		observation.
Mental Deficie	ency				9		
Tuberculosis,	Pulmonary						
,,	Non-Pulmona	ary			- 2		
Other Condition	ons	•••	•••	•••	1067	•••	45
		Total			2808		131

183 children were referred to their private doctors.

The total number of attendances of children at the Inspection Clinic was 4.261.

Miscellaneous Inspections.—In addition to the inspections of children at the Clinic for defects, consultations, etc., the following examinations were made:—

Examination of children regarding fitness to attend	the	
Hest Bank Camp School		849
The Thursby Convalescent Home, St. Annes		288
The Cinderella Home, Rossall		30
Toc H Holiday Home		42
Examination of contacts, etc., re infectious disease		172
Special examinations by the Chief School Med	lical	
Officer for Mental Deficiency, etc		1
Special inspections by Nurses		261

FOLLOWING UP.

When the Medical Officer finds a child suffering some defect which requires attention, the parent, if present, is informed. If the parent is not present a written notice of the defect is made out and passed to the Head Teacher to send to the parent.

The defects are classified as those requiring treatment and those which require to be kept under observation only. "Follow up" records are completed in respect of each child found to have a defect. Where defects are found which require treatment, the notices to the parents are followed, when necessary, by personal visits of the school nurses to the homes. The parents

are interviewed and the necessity for securing appropriate treatment is stressed, with instructions in all cases as to how such treatment may be secured. Where treatment may be obtained under the Authority's scheme the parents are informed. The school nurses continue to follow up these children with defects requiring treatment at monthly intervals, by visits to the schools or further visits to the homes, until the defects are remedied.

Children with defects requiring either treatment or observation are followed up also by the Assistant Medical Officer at each visit made to the schools, and as a result of these re-inspections by the Medical Officer, further notices may be sent to the parents or further domiciliary visits made by the nurses.

The following shows the amount of work done.

No. of visits by the Medical Officer to schools:—
For re-inspection (i.e. to follow up children with defects)—12.

Visits by the Nurse to homes on account of

Defect

	Dental Defects					1170	
	Defective Vision					868	
	Enlarged Tonsils	and	Adenoi	ds		1085	
	Orthopædic Case	s				435	
	Other Defects					1941-	-5499
ts	followed up by the	he N	urses in	the	schools		4141
							9640

INFECTIOUS DISEASE.

Review of the action taken to detect and prevent the spread of Infectious Disease.

The School Medical Officer receives, as Medical Officer of Health, notification of all cases of notifiable infectious diseases occurring in the Borough. The necessary exclusion certificates under Article 53(b) of the Code and a list of houses in which infectious diseases have occurred are sent daily to the School Attendance Department.

The legally notifiable diseases amongst school children notified to the Medical Officer of Health were as follows:—

Disease.			No. of Notifications.	Deaths.
Scarlet Fever Diphtheria and Membranous Croup Non-Pulmonary Tuberculosis			$\frac{228}{260}$	$\begin{array}{c} 3 \\ 14 \\ 2 \end{array}$
Measles		}	97	
Primary and Influenzal Pneumonia Cerebro Spinal Fever		:::\	$\frac{31}{1}$	3
Erysipelas	• • • •)	6	
Encephalitis Lethargica			î	1

An extensive epidemic of scarlet fever, which was prevalent during the last five months of 1933, continued until the end of January, 1934. The majority of the cases were of mild or moderate severity, serious complications being few.

Diphtheria, although not manifest in epidemic form, was unduly prevalent in the first quarter of the year, after which few cases occurred until October, when an epidemic originated in the west side of the Borough, which affected three schools. The disease was of a virulent type, with a high incidence of serious complications, particularly heart affections.

There were no epidemics of other infectious diseases. Measles and whooping cough were present to only a small extent.

RECORD OF SPECIAL INVESTIGATIONS BY SCHOOL NURSES RE INFECTIOUS DISEASES.

No. of Positive Swabs	16	16
No. of Children and Teachers Swabbed		650
No. of Children Inspected	205 4 124 304 97 97 14 47	1081
Disease Investigated	Measles Diphtheria do. do. do. do. do. do.	
No. of Inspections		867
		:
-6		÷
Schools Visited	Abel Street Healey Wood Lane Head Habergham Stoneyholme Rosegrove St. Mary Magdalene's Hargher Clough	Total

No schools were closed by order of the Medical Officer of Health. In December, 8 certificates were issued to cover periods of low attendance in schools on account of infectious diseases. 6 of these certificates were in respect of Diphtheria and 2 were in respect of Mumps.

Immunization against Diphtheria.—The numbers dealt with during the year at the Immunization Clinic are as follows:—

		Children	Children	
		of pre-scho	of school	
		age.		age.
Schick Tested				23
Re-attendances for interpre-				
tation of the Schick Test				55
No. immunized		110		424
Attendances for immunization	n	340		1282

The following tables gives the incidence of infectious diseases in the various schools.

INFECTIOUS DISEASES. Notifiable Diseases occurring in the Elementary and Secondary Schools of the Borough.

School		arlet ever	Diph	theria	Mea	ısles	Pneu	monia		·Pul.		ther eases
	М.	F.	М.	F.	М.	F.	М.	F.	M.	F.	М.	F.
Abel Street Back Lane Burnley Wood Coal Clough Fulledge Habergham Hargher Clough Healey Wood Heasandford Holy Trinity Lane Head Lionel Street Pickup Croft Red Lion Street Rosegrove Rose Hill St. Andrew's St. Augustine's St. John's St. Mary's St. Mary Magdalene's St. Peter's St. Stephen's St. Thomas's Sandygate Stoneyholme Todmorden Road Junior Whittlefield Wood Top Coal Clough Special Heasandford Special Blind Deaf Open Air Nursery Todmorden Road Central Grammar High Others	4 3 8	6 2 6 15 6 3 6 5 9 7 7 3 2 1 5 1 3 — 2 6 9 4 4 4 — 2 4 3 3 — — 3 1 1 3 — 2 5 5 — 133	3 -1 4 5 8 5 -1 -7 3 -2 18 -1 -3 5 9 7 7 3 2 7 3 1 21 1 1 1 5 115		20 1 — 6 6 — 1 1 — 1 1 — 1 1 — — — — — — — — — — —	28 — 1 7 — 1 1 3 — — 1 1 1 1 — — — 1 1 54	5 — 1 — — — — — — — — — — — — — — — — —		1	1 — 1 — 1 — 1 — — — — — — — — — — — — —	1	1
					3							

Head Teachers are requested to inform the School Medical Officer of cases of sickness amongst school children coming to their notice.

Infectious Diseases Reported by Teachers during 1934.

School	Measles	Whooping Cough	Mumps	Scarlet Fever	Diphtheria	Chicken Pox	Other Diseases
Abel Street	47	4	36	10	2	27	2
Back Lane	_	_		_	- 1	-)	<u> </u>
Burnley Wood	_	14	63	6	2	16	
oal Clough	_	_	_	3	2		
ulledge	_	_	_	_	<u> </u>	_	_
labergham	_				4	1	<u> </u>
Hargher Clough	_	_	3	2	1	—	1
Healey Wood	_		_		_		
Heasandford	_	3		5		21	
Holy Trinity		_	_	5	2	<u> </u>	
ane Head	_	_	-		5	2	3
Lionel Street	3	8	35	2	2	4	1
Pickup Croft	_		—				
Red Lion Street	_	_	_	2	3		_
Rosegrove		_	_				manus.
t. Andrew's	I		_				
			_	_		1	
t. Augustine'st. John's			_			• 0	_
t. Mary's		_	_	_			
t. Mary Magdalene's			13		10		1
t. Peter's			13		10	2	1
t. Stephen's	1		42	1	î	1	
t. Thomas's		_			î		
andygate	_					_ 1	
toneyholme	_		_	_	1		
odmorden Road Junior	_		_	_			
Vhittlefield	_		64	3	4	8	
Vood Top	_						_
oal Clough Special	_		_	_	_		_
leasandford Special	_	_	_		_		
Blind		_	_	_	- 1		
Peaf		_	_	_	-	_	_
pen Air		_	_	_	_		_
Tursery	_	15	7	_	_	9	
odmorden Road Central	_	_ \	_		_		_
ramınar				_	-		-
ligh	-	_		3	_		_
Totals	52	44	264	44	40	91	9

Infectious Illnesses of Children prior to entering School.—It was found that, during the pre-school life of the entrants

70.4%	had suffered	from	Measles.
10.0%	,,	,,	Scarlet Fever.
1.9%	,,	,,	Diphtheria.
41.1%	,,	,,	Whooping Cough.
23.4%	,,	,,	Chickenpox.
0.6%	.,	.,	Rheumatism.

172 children were examined as to their fitness to re-enter school after having had an infectious disease or being a "contact."

Vaccinal Condition of School Children.—Only $38\cdot2^{\circ}_{/0}$ of the children who were medically inspected on entering school were found to be vaccinated.

MEDICAL TREATMENT.

The Local Authority provides treatment for the following defects.

At the School Clinic:—

Minor Ailments: Daily.

Dental Defects: Daily, by appointment.

Visual Defects: Friday. (Monday and Wednesday afternoons

by appointment).

Additional sessions held when necessary.

Orthopædic: Daily, by appointment.

At the Municipal General Hospital:—

Operative Treatment of Enlarged Tonsils and Adenoids.

Children found, either in the schools or at the clinics, to have minor ailments, defects of vision, dental defects, orthopædic defects or adenoids and enlarged tonsils are advised, in the first place, to consult their own regular medical attendants. A large number, however, elect to have treatment under the Local Authority's Schemes. The amount of treatment given at the various clinics showed a steady increase for several years. In 1934 the total attendances exceeded that of the previous year by 2168.

The following table shows how the work of the advisory and treatment clinics has expanded during the last twelve years.

TOTAL CLINIC ATTENDANCES. (PRE-SCHOOL AND SCHOOL CHILDREN).

							Nose,						
Minor							Throat						
Year. Ailments.	Ophth	almic.	Dental.	In	spection	١.	and Ear.	О	rthopæd	lic.	Miscel'o	us.	Total.
1923 9,947	1,0	34	1,412		5,164								17,557
1924 10,433	1,3	23	2,254		4,705								18,715
1925 16,769	3,0	29	2,261		4,623				_				26,682
1926 18,570	3,5	83	3,156		3,900		—						29,209
1927 18,550	3,3	26	3,672		4,032				14				29,750
1928 20,297	3,3	29	4,670		4,305		266		464				33,331
1929 20,364	2,9	80	4,288		4,111						2,118		34,805
1930 24,028	4,4	51	5,013		4,810		105		974		1,324		40,705
1931 21,989	5,5	71	5,262		4,655		63		1,203		1,699		40,442
1932 23,344	5,3	69	6,718		4,572		95		3,523		1,293		44,914
1933 20,635	3,9	76	6,295		4,866		447		8,962		1,429		46,610
1934 19,184	4,6	75	7,742		4,287		338		10,809		1,693		48,778

Minor Ailments.—1,405 cases were treated by the School Nurses, as compared with 1,357 in 1933. This number includes 88 who were under treatment at the beginning of the year.

The following gives details of the number of cases of elementary and special school children and their attendances.

			No. of	Number of	New Cases	Total	
Diseases			Cases under treatment 1/1/34	Referred Inspection Clinic	Referred School Medical Inspection	No. of cases - dealt with	No. of Attend- ances
SKIN:							
Ringworm: Head			1	9		10	237
Body			1	26	1	28	379
Impetigo			1	140	15	156	1,571
Other Skin Diseases			4	97	8	109	1,672
Scabies	• • •		_	6	2	8	78
EYE:-					1		
Blepharitis	•••		9	31	3	43	1,306
Conjunctivitis	• • •		1	36	2	39	603
Iritis Keratitis			1				10
0 1 771	• • •		1	4 8	1	6	40
Other Eye Conditions	• • • •		1	24	1	$\frac{9}{25}$	$\frac{80}{145}$
EAR:—	• • •	• • • •	1	24	1	20	140
Other Ear Diseases			23	66	9	98	850
Otitis Media				87	13	100	2,166
MISCELLANEOUS, e.g., Min					10	100	2,100
Injuries, Bruises, Sores,		• • •	46	679	48	773	9,181
			88	1,213	104	1,405	18,308
				1,31	7		

37 children suffering from scabies were given sulphur baths, and their clothes were disinfected at the Corporation Cleansing Station; there were 223 attendances.

In addition to the minor ailments dealt with at the Clinic, it was ascertained that 365 cases were treated otherwise. These were:

 	 	1
 	 	17
 	 	118
 	 	50
 	 •••	45
 	 	134
		—
		-365

Pre-School Children treated at the School Clinic.—The following cases were referred from the Infant Welfare Centres for treatment at the Minor Ailment Clinic.

			No. of Cases.	No.	of Attendances.
SKIN:					
Ringworm: Head			1		9
Body			_		_
Impetigo			20	•••	125
Scabies			_		_
Other Skin Conditions			11		95
Eye:					
Blepharitis			7		79
Conjunctivitis			3		4
Iritis				•••	_
Keratitis	• • •				_
Corneal Ulcer					-
Other Eye Conditions			1		2
Ear:					
Otitis Media			11		105
Other Ear Conditions			20		196
Miscellaneous, e.g., Minor	Injur	ies,			
Bruises, Sores, etc.	•••	•••	45	•••	247
Total			119		862

Ear, Nose and Throat Defects.—The Laryngologist examines all cases referred to him at the clinic and selects cases for operation. Before operation, cases are examined to detect any physical condition which may contra-indicate operation. Generally conservative methods are given a trial before cases are submitted to the laryngologist. In order that faulty breathing and faulty posture produced by unhealthy tonsils and adenoids shall be corrected, parents are asked to bring their children to the clinic a few days after they return from hospital, where the orthopædic nurse holds a session daily for breathing exercises. Post-operative tonsils and adenoids cases attend this breathing class daily for several weeks.

Tonsils and adenoid operations were performed at the Victoria Hospital since the inauguration of the scheme in 1927, but owing to the shortage of bed accommodation it was rarely possible to arrange for in-patient treatment of the children before and after operation. The arrangement with the Board of Management of Victoria Hospital was, therefore, terminated in August, 1934 and arrangements were made for the operations to be performed in the Municipal General Hospital, as from 1st September, 1934. Dr. Snowball, the Laryngologist to the Committee, was appointed a member of the Consulting Staff of the Municipal Hospital and he continues to perform the operations. Children are now admitted to the hospital on the afternoon prior to the operation and are prepared for the operation in hospital. They are not discharged from hospital for at least 24 hours after the operation. The children are accommodated in a small ward of six beds.

The specialist officer also undertakes the examination of children with ear defects referred to him by the Assistant School Medical Officer.

Examinations of Ear, Nose and Throat cases carried out by the specialist officer:

Advised Operative Trea	tment		 	83
Advised other forms of	treatme	nt	 	16
Not advised treatment			 	1
Deferred			 	6

The number of elementary school children who received treatment for defects of the nose and throat are given in the Board of Education tables appended to this report.

School children, suffering from ear conditions, made 268 attendances at the clinic, 230 being for treatment by the nurses. The treatment of chronic otorrhœa by insufflation of 1% Iodine in Boracic Acid has been used as a routine during the last three years and has given good results. By its use the duration of treatment is much reduced and consequently children with otorrhœa are able to attend school more regularly.

Skin Diseases.—The majority of cases of skin diseases were treated at the Minor Ailments Clinic. A scheme is in operation with the Manchester and Salford Skin Hospital, whereby cases of ringworm of the scalp, which require X-Ray treatment, are treated there at a cost to the Authority of £1 1s. 0d. per case. During 1934, 7 cases were referred to Manchester. Children are referred to the "Light" Department of the Municipal Hospital for diagnosis of ringworm by means of "Wood's Glass."

External Eye Disease.—Most of these defects are treated in the Minor Ailments Clinic. Particulars are given on page 29.

VISUAL DEFECTS.—The part-time Ophthalmic Surgeon (Dr. Snowball) devotes two sessions per week to refraction work. When necessary to cope with the waiting list additional sessions are arranged. During the year Dr. Snowball held 131 sessions and examined 475 new cases. 378 children were prescribed spectacles.

Prior to the examination by the Ophthalmic Surgeon, children are given a course of atropine drops for several days by the school nurses. This necessitated children making 1,877 attendances at the clinic.

In addition to 462 new cases, the Ophthalmic Surgeon re-examined 632 children, who had at some time previously been supplied with spectacles, to ensure that the latter were still suitable. Consequent on these re-examinations it was necessary to recommend new spectacles for 374 children, 1 child to have operation also, and 12 to cease wearing spectacles. 1 child was recommended for the special class for myopic children.

In all 1,107 children had their defective vision investigated. It is occasionally found that children who may have obtained spectacles through other channels, have spectacles which do not conform to their refractive errors, and it is not infrequently necessary to give new prescriptions or recommend that the spectacles be discarded.

Parents are advised, after children have obtained spectacles, to present them again at the clinic so that the Ophthalmic Specialist may see that the spectacles conform to the prescriptions issued. 945 children attended for this purpose during the year.

The total number of attendances made by school children at the Ophthalmic Clinic, including preliminary preparation of the eyes by the nurses, was 4,617.

Children who were recommended but did not attend the Ophthalmic Clinic were followed up by the school nurses, who found that 16 children obtained treatment privately.

The total number of elementary school children who obtained spectacles during 1934 was 773. In 360 instances the spectacles were obtained through the Education Committee's scheme.

INTERNAL EYE DISEASES.

Classification of Cases dealt with in 1934.

				EL:	EMENTAR	Y AND	SPECIAL	School	CHILDREN.
Defe	CT.			N	EW CASE	es. C	OLD CASE	s.	Totals.
Hypermetropia					68		51	•••	119
Hypermetropia and C	orneal (Opacity	•		1		_		1
Hypermetropia and C	horoida	l Atrop	hy		1				1
Hypermetropic Astigr	natism				167		151		318
Myopia			•••	•••	46	***	89	•••	135
Myopic Astigmatism		•••	• • • •	• • •	6		48	•••	54
Mixed Astigmatism		•••	• • •	•••	91	•••	121	•••	212
Emmetropia	•••	•••	•••	•••	20		1	•••	21
Cataract		•••	•••	•••	1	•••			1
Nystagmus Plus Corr	ieal Opa	acities	an d						
Polar Cataract		•••	•••	•••		•••	1		1
Strabismus	•••	•••	•••	•••	—	•••	3	•••	3
Strabismus									
Plus Hypermetropi	c Astign	natism	• • •		23		80		103
,, Hypermetropi	a	•••			31		75		106
" Myopic Astign	natism			•••	1		6		7
,, Emmetropia					2				2
,, Myopia							3		3
,, Nystagmus			•••		_		1		1
Not yet classified	•••		•••	•••	17		2	•••	19
	Totals		• • •		475		632		1107

THE ORTHOPÆDIC CLINIC.

The statistics given in the following tables show that a considerable volume of valuable work has been performed in the Orthopædic Clinic. The 210 new cases examined by the Orthopædic Surgeon are 37 more than in the previous year and almost double the number examined two years age. The total cases kept under supervision by the surgeon have shown a similar increase. This does not mean that there are more children suffering from postural and crippling defects, but that there is better ascertainment of such cases and, now that the clinic is well established, with fortnightly sessions and daily supervision and treatment by the specialist nurse, cases are able to be reviewed

at more frequent intervals. The extension of the scheme, which was made in September, 1932, enables children to be dealt with while their defects are still in the early stages, with consequent prevention of the development of gross deformities.

The figures show that relatively few orthopædic cases require treatment in hospital, their defects being corrected by remedial exercises, special splints, surgical boots, plaster cases and other appliances.

Close co-operation exists between the orthopædic clinic and the other health services. The Assistant Medical Officers are present when the specialist examines patients referred by them. The orthopædic nurse gives massage, etc., to the infants undergoing treatment for rickets, etc., in Bank Hall Hospital and holds special remedial classes for open air school children and post-operative tonsils and adenoid cases.

The following statistics include school and pre-school children and tuberculous cripple cases.

Cases of crippling due to active tuberculosis received hospital treatment through the Tuberculosis Scheme.

Orthopædic Clinic.

Sessions held during 1934.		No.
Classes for Breathing Exercises at Clinic (Girls)	 	164
" Breathing Exercises at Clinic (Boys)	 	145
" Postural Exercises at Clinic (Girls)	 	126
,, Postural Exercises at Clinic (Boys)	 	93
,, Flat-foot Exercises at Clinic	 	83
,, Postural Exercises at Open Air School	 	100
Sessions at Bank Hall Hospital: Massage, etc	 	81
Sessions for Individual Treatment at Clinic	 	217
Sessions for Home Visiting and Clerical Work	 	138
Journeys to Orthopædic Hospitals	 	14
Sessions at Orthopædic Hospitals	 	14
Total Sessions held by Orthopædic Surgeon during 1934	 	23
Total Sessions attended by Orthopædic Nurse during 1934	 	504

The following Table shows the Defects from which the 413 Cases Examined by the Orthopædic Surgeon were suffering.

		NT-						C			
	School Medical Cases		EW CAS	Child		Sch Med Cas	ool ical	LD CAS	Child		
Defects.	Elem. & Spl.	Sec.	Tub.	Wel- fare Cases	Totals	Elem. & Spl.	Sec.	Tub.	Wel- fare Cases	Totals	Grand Total
fantile Paralysis	2 -3 1 4 1 7 -1 14 1 -9 -4 4			1 3 4 1 4	3 3 7 1 4 1 7 — 14 1 — 9 — 4 5 21	16 12 17 4 2 8 1 4 3 2 7 1 2 4 26 3			1 3 1 5 — — — — — — — — — — —	17 15 1 22 4 2 2 8 1 5 3 2 9 1 3 4 29 3	20 18 4 29 5 6 3 15 1 19 4 2 18 1 7 9 50 3
uberculosis of Bones and bints— (a) Active ther Postural Defects ontracture Knee ther Conditions	85		4 4 —	4	4 4 85 1 33	32 — 14		5 17 — —		5 17 32 — 18	9 21 117 1 51
Totals	. 185		8	17	210	160	6	22	15	203	413

THE TREATMENT RECOMMENDED BY THE SURGEON IS AS FOLLOWS:-

			New C	ASES				OLD C	CASES		
	Med Ca El'm &	lical ses	Tuberculosis	Child Welfare	Totals	Med Ca El'm &	nool lical .ses	Tuberculosis	Child Welfare	Totals	Grand Totals
No. of children recommended Electric Treatment		_	-	_	_	1	_	_	1	2	2
Massage	2		W-14 MIN	1	3	2		1	1	4	7
Stretchings	2			5	7	1		1	_	2	9
Splints and Calipers	7	-	- }	3	10	13	1	4	2	20	30
Adaptations to Boots	1	-	_	-	l	4	-	2	1	7	8
Medical Treatment	1	-		_	1	2	-	AM 44		2	3
Plasters	5	-	2	_	7	5		5	_	10	17
Strappings	7	-	_	2	9	4	-	_	2	6	15
Wedges	18	-	1	4	23	14	1		5	20	43
Remedial and Postural Exercises	119		1	4	124	17	1	2	1	21	145
Manipulations	-	_		2	2				_	_	2
Hospital Treatment	8	-	2	2	12	1		6	1	8	20
Examinded by Ophthalmic Surgeon	-	-		-	_	-		-	1	1	1
Examined at Manchester Royal Infirmary	2	_	_	-	2	4	_	1	-	5	7
X Ray	6	-	2		8	10		6	-	16	24
Slings, Pads, etc	9	-	1	_	10	8	-	6		14	24

Hospital Treatment of Orthopædic Cases during 1934.

	School Children	Child Welfare Cases
Remaining in Hospital, 1st January, 1934	 5	1
Admitted during the Year	 7	1
Discharged during the Year	 9	2
Remaining in Hospital, on 31st December, 1934	 3	<u> </u>
Average duration of Stay (in days) of those discharged during 1934	 145	72

Provision of Splints, Surgical Boots, etc., for Children attending the Orthopædic Clinic.—The following have been supplied:

							lical ses Sec.	Tub. Cases	Child Wel- fare Cases	Total
Night Splints						5	1	_	3	9
Calipers and Iron	ıs					2		2		4
Calipers and Iron	is repa	ired ar	nd leng	thened		8		1		9
Knee Shields						1		2		3
Boots wedges, ra	ised w	ith cor	k, tube	s, fitted	1					
with T strap	s, etc.					5		7	1	13
Thomas' Peg Leg	g repai	red				4		_		4
Knee Slings	•••					2		2		4
Plaster Cases						8	_	8		16
Groin Straps						1		2		2
Elastic Belt						1		1		2
Cuff and Collar	•••	•••		•••	•••	1	_	-	<u> </u>	1
Total No. of Surg	gical A	Applian	ces, Iro	ons, etc		37	1	25	4	67

Work Carried out by the Orthopædic Nurse, During 1934.

	School Med	dical Cases		Child
	Elementary & Special	Secondary	Tub. Cases	Welfare Cases
Supervision of Cases	48	1	8	6
Cases under Treatment	199	3	30	25
Totals	247	4	38	31

Total attendances at the Orthopædic Clinic and Ancoats Hospital:—

Referred from	Attendances at Orthopædic Clinic	Attendances at Ancoats Hospital	Total Attendances
School Clinic { Elementary Secondary Special	7650	14	7664
	96		96
	2060		2060
Tuberculosis Clinic	245	2	247
Child Welfare Clinic	758	1	759
Total	10809	17	10826

			Child	
	Sch	ool	Welfare	Tuberculosis
No. of Children remaining on the	Child	ren.	Cases.	Cases.
register of the Orthopædic Clinic	Elem.	Sec.		
on 31st December, 1934	. 178		 25	51

In addition to the treatment of cases on the orthopædic clinic register, the orthopædic nurse gave remedial exercises, massage, breathing exercises, etc., to children with minor deformities and postular defects and post-operative tonsil and adenoid cases referred direct to her by the Assistant School Medical Officers.

The following cases were referred by the Assistant Medical Officers direct to the Orthopædic Nurse for treatment:—

	School Med	dical Cases	Tuber-	Child
	Elementary & Special	Secondary	culosis Cases	Welfare Cases
No. of Cases	259	5	_	47
ATTENDANCES: For Remedial Exercises For Breathing Exercises For Corrective Treatment	2312 2282 491	4 3 15	_	4 43 283
TOTAL	5085	22		330

THE WORK OF THE SCHOOL DENTAL DEPARTMENT.

Although the single school Dentist carried out a creditable volume of work it was manifestly impossible, with a school population of 13,000 children, to provide dental treatment for all those requiring it. Consequently a second dentist (lady) and an additional dental attendant were appointed and took up duties in November, 1934. The consulting room adjoining the existing dental treatment room was equipped as an additional treatment room.

Consequent on the increase in the staff, arrangements were made for routine dental inspection and treatment of children aged 5 years and secondary school pupils to be undertaken during 1935. The addition to the staff has made it possible to perform more conservative dental treatment and hold frequent sessions for extraction of teeth under general anæsthesia.

Inspection.—57 half-days were devoted to inspection during the year. Inspection and re-inspection was confined to elementary school children of age groups 6 to 14 years inclusive, together with a few aged 15 years. 5,381 were examined in the schools and 4,618 or 86% had defective teeth as against 78% in 1933.

The following gives the number of elementary and special school children examined in each age group, together with the number with defective teeth.

Age Group	Total	Inspe	spected		quiring ment	Numbe defe requ Trea	cts iring tment
		Boys	Girls	Boys	Girls	Boys	Girls
6 years	648	334	314	48	36	286	278
7 ,,	651	350	301	34	20	316	281
8 ,,	663	370	293	29	23	341	270
9 ,,	639	349	290	41	30	308	260
10 ,,	695	389	306	41	45	348	262
11 ,,	639	357	282	59	49	299	232
12 ,,	749	436	313	76	50	359	264
13 ,,	540	305	235	61	39	244	195
14 ,,	96	49	47	20	10	29	37
15 ,,	11	6	5	2	-	4	5
Total	5331	2945	2386	411	302	2534	2084

In addition to these routine school inspections, 2,094 children were dentally inspected at the clinic, and 3,751 cases attended the clinic to have appointments made for dental treatment.

Treatment of Dental Defects.—455 treatment sessions were held at the school clinic, and 4,360 cases were dealt with as against 4,328 in 1934.—2,022 were cases specially referred by the assistant school medical officer or teachers. Further particulars of the treatment given will be found in the statistical Appendix to this Report.

"Following up" of Dental Defects.—The parents whose children have not attended the Dental Clinic as the result of having been notified of the need of dental treatment, are interviewed by the School Nurse.

During the year, 6,806 children were notified as requiring treatment as a result of being dentally inspected, and the following gives the after-history of the cases:—

Attended School Dental	Clinic					4360
Received Treatment from	m own	Dentis	s t			26
Parents Indifferent						2024
Treatment not Advised						15
Left School or could not	be Tr	aced				43
Left Town						9
Deceased						1
Remaining to be followed	ed up a	t the e	nd of t	the year	r	597

The following figures show the numbers of fillings and extractions carried out during the last 9 years for elementary and secondary school children.

		Fillings.		E	Extraction	s.	Othe	er Operati	ons.	
Year	Temp- orary Teeth	Per- manent Teeth	Total Fillings	Temp- orary Teeth	Per- manent Teeth	Total Extrac- tions	Temp- orary Teeth	Per- manent Teeth	Total other Opera- tions	
1934 1933 1932 1931 1930 1929 1928 1927 1926	562 19 25 49 31 20 378 229 24	2329 2999 2535 2083 1971 2045 1540 1135 528	3891 3018 2560 2132 2002 2065 1918 1364 552	3924 3134 4638 3763 3641 2982 5793 6097 5404	965 632 714 580 490 367 481 571 497	4889 3766 5352 4343 4131 3349 6274 6668 5901	296 110 120 177 102 1054 2229 1665 1509	742 598 688 437 319 386 380 369 65	1038 708 808 614 421 1440 2609 2034 1574	Full-time Dentist appointed. Part-time Dentist.

- "Light" Therapy.—Artificial sunlight treatment for children referred from the school clinic is available:
 - (a) At Bank Hall Hospital, where a clinic is held twice weekly for the treatment of pre-school and school children, and
 - (b) At the Municipal General Hospital.

The "light" clinic at Bank Hall is under the direction of one of the Assistant Medical Officers and that at the Municipal General Hospital is directed by the Consulting Radiologist of the hospital.

During 1934, 56 school children received treatment at the Bank Hall Clinic and 18 at the Municipal General Hospital. In addition 53 children were referred from the School Clinic for X-Ray examinations at the Municipal General Hospital.

"LIGHT" TREATMENT OF SCHOOL CHILDREN.

				-	Resul	Result of Treatment	ment	Remaining
	Diagnosis	New Cases	Remaining from 1933	Cases under treatment	Improved	In statu quo.	Treatment dis-	under treatment at end of 1934
Bank Hall	Debility	10	¢1	12	-+		+	4
Hospital	Anæmia	က	ে ।	70	4	1	1	1
(Mercury	Alopecia	က	ဂ ၊	īĊ	က		≎1	
Vapour	Chronic Respiratory Disease	က	1	က	1		1	ণ।
Lamps.)	Tuberculosis Adenitis	7		7	က	1		ಣ
	Chilblains	17	1	18	10	1		7
	Blepharitis	1	-	_	1	I	1	1
	Other Conditions	4	_	ಸಂ		1	_	က
	TOTAL	47	6	56	27		10	19
					_			

Total Treatments	613
Electrical	t~
Kromayer Lamp	84
Mercury Vapour Lamp	50
Carbon Arc Lamp	238
Attendances	547
No. Treated	18

Municipal General Hospital.

OPEN AIR EDUCATION.

School Camp.—The permanent School Camp at Hest Bank, near Morecambe, to which are sent children who do not have an opportunity of obtaining a holiday out of town during the summer vacation, was used for a lengthier period during 1934. This was made possible by the installation of electric light in 1933 and the building of additional bathroom and lavatory accommodation, attached to the main dormitory, in 1934. Children over 11 years of age were sent from the elementary and special schools. The school has accommodation for 50 scholars.

The school was opened on the 16th March and closed on 26th October. Boys were sent in the earlier and later periods and girls in the warmer summer period. All children are medically inspected before proceeding to the School Camp. This entailed the examination of 849 children, of whom 390 boys and 380 girls were sent to the camp for a fortnight.

Convalescent Home.—A Convalescent Home at Lytham St. Annes, built by the late Sir John Thursby, has accommodation for 12 children of each sex, and is provided for the children of Burnley and the surrounding district. It was open for the reception of children from 24th March to 22nd October. During this period 381 children were admitted, 291 (122 boys and 169 girls) being Burnley school children. Practically all the Burnley children are selected by the assistant school medical officers and immediately prior to their admission they are examined regarding cleanliness and freedom from infectious disease. Boys aged 4–10 years and girls aged 4–12 years are admitted for periods of 1 to 3 weeks.

Pearson's Fresh Air Fund (Burnley Committee) has a holiday home at a farm house on the moors a few miles from Burnley, which is open during the summer months, with accommodation for 12 poor boys. During the summer 120 boys each had two weeks' holiday at this farm house.

Playground Classes.—There is no specific organisation of playground classes. The matter is left to the discretion of head teachers. The numbers of children in any classes so taken are 50 between the ages of 5 and 11 years and 40 between 11 and 14 years.

There is no arrangement for open air education by means of open air classrooms in public elementary schools.

PHYSICAL TRAINING AND PLAYING FIELDS.

Physical Training.—The Assistant School Medical Officer, at each routine medical inspection, indicates to the head teachers, children who, on

account of physical defects, should be excluded from physical training classes. Children requiring special exercises for postural defects are referred to the clinic for remedial exercises given by the Orthopædic Nurse.

The Revised Handbook on Physical Training, issued by the Board of Education in 1933, is in use in the schools. There is no Organiser of Physical Training employed. Special instructional classes for teachers, based on the revised handbook, were held during 1934.

Playing Fields and School Sports.—Competitions in football, cricket, netball, athletics and swimming, organised by the Schools' Athletic Association continue to be held, and the training of the children for these competitions proves a valuable adjunct to the services for the improvement of the children's physique.

Playing Fields are now in use at Cherry Fold, Lockyer Avenue, Walshaw Farm, Towneley Holmes and Towneley. Those at Cherry Fold and Lockyer Avenue are owned by the Education Committee and have dressing rooms, spray baths and prepared playing pitches and are in excellent condition. The others are rented, and a dressing hut has been erected on the Walshaw Farm ground.

PROVISION OF MEALS.

A considerable number of school children continue to receive two meals, breakfast and dinner, daily. The cooking of the meals at the Central Kitchen, the transport to the feeding centres and the arrangements for serving of meals at the centres have been described in previous reports. Six main feeding centres, which were established consequent on the re-organisation, in 1932, of the Scheme for the provision of meals, were functioning at the beginning of 1934. Consequent on the large number of children attending some of the centres, it was necessary in March, 1934, to open an additional centre in Myrtle Bank Sunday School. In addition a few children receive meals at premises in Rosegrove and Branch Road.

Children recommended for free meals are selected mainly by the Head Teachers of the schools. The Assistant School Medical Officer recommends children who are found at medical inspection to require meals on medical grounds. Children who are provided with free meals are not re-examined from time to time by the medical staff in order to ascertain whether their condition is such as to require the free provision of meals for a further period.

During 1934, 572,923 meals were supplied, as compared with 541,777 in 1933.

Breakfasts 240,744 Dinners 332,179

Total ... 572,923

The highest number of children fed was during the week ended 14th April, 1934, when 1,210 children attended the feeding centres.

THE PROVISION OF MILK DURING SCHOOL HOURS.

In the early part of 1934, Grade A. Milk, in one-third of a pint bottles was supplied to children in four schools, at a charge of 5d. per week, and in practically all the other schools arrangements were in operation for the provision of either Pasteurised or ordinary milk or dried malted milk at a charge of 3d. per week.

When the Milk Marketing Board's Scheme for the provision of milk for school children came into operation, malted milk ceased to be used and suitable retailers of milk were selected to supply all the schools in the Borough, the source and quality of the supplies being approved by the Medical Officer of Health.

Soon after the Milk Marketing Board's Scheme came into operation, 8,544 children were receiving milk in schools on payment of ½d. per third of a pint. By the end of December, an additional 771 children were selected by the school medical staff, as requiring milk. Of these 294 received it on payment, and 477 received it free. The total number of children, therefore, who received milk in schools at the end of the year was 9,315, or approximately 69% of the total children on the rolls of Elementary, Special and Secondary Schools. Approximately 6,000 children are provided with pasteurised milk and 2,000 with Grade A. milk.

Arrangements have been made for all children who are provided with milk to be surveyed periodically. Children receiving free milk will be reinspected at about three-monthly intervals.

COD LIVER OIL.

Necessitous children, recommended by the medical officers, receive cod liver oil and malt or emulsion free from the school clinic. This is taken to the school and supplied by the teachers to the children according to the instructions of the medical officers. During 1934, 212 children, who were within the scale of necessity, received 813 lbs. of cod liver oil and malt and 24 pints of emulsion.

SCHOOL BATHS.

Wash Baths are not provided at any of the Elementary Schools. They are installed in the two Special Schools for the Mentally Defective, at the Open Air School and in the Nursery School.

The Baths Committee provide facilities by allowing the Elementary School children the use of the Public Swimming Baths. The Education Committee arrange for the attendance of classes of children usually during school hours. 61,504 attendances were made at the three Swimming Baths, compared with 63,501 last year. In addition 25,075 attendances were made by school children on Saturday mornings.

SCHOOL JOURNEYS.

No alterations have been made in the arrangements in operation to enable children to travel free on public vehicles to the Special schools and the School Clinic. (see report for 1932, page 56).

CO-OPERATION OF PARENTS, TEACHERS, SCHOOL ATTENDANCE OFFICERS AND VOLUNTARY BODIES.

The number of parents attending the routine examinations was as follows:—

With the Entrants 903 or 76.5% ,, Second Age Group ... 594 or 50.5% ,, Third Age Group ... 151 or 12.5%

The number of parents who attend when children undergo their final medical examination before leaving school is very low. Parents do not appear to appreciate that their presence at this final examination is most desirable in the interest of the children. The Medical Officer has before her a record of the children's health throughout school life and is in a position to give the parents of children who have suffered from serious complaints, useful advice regarding the future care of the children and guidance as to the types of employment which will be suitable, having regard to physical disabilities or ailments.

Head Teachers continue to be most helpful and sympathetic towards the work of the School Medical Service. In organising the medical, dental and cleanliness inspections in the schools and the following up of children with defects, every effort is made to avoid as far as possible interruption of the routine class work. However, the visits to the schools of the school medical staff cause unavoidably some interference with the curriculum of the school, especially as in some of the schools a class room has to be vacated for use by the doctor or nurse, and it says much for the patience and courtesy of the teaching staff that they give ungrudgingly most valuable assistance, which enables the medical work to be carried out smoothly and expeditiously. They are also most helpful in referring special cases for examination, and supervising the regular attendance at the clinic of children who require treatment. I have to acknowledge the assistance given by the teachers in ascertaining children for attendance at the remedial clinic for stammerers.

School Attendance Officers co-operate most effectively in the investigation and following up of cases of suspected infectious disease and of children who attend irregularly for treatment at the clinic and in many other ways.

The voluntary organisations who give valuable assistance are the Committee of Management of the Thursby Convalescent Home for Children, Pearson's Fresh Air Fund and the local branch of the National Association for the Prevention of Cruelty to Children. The Committee of the Thursby Convalescent Home invariably accept children recommended by the Assistant School Medical Officer for admission to the Home at St. Annes. The local Committee of Pearson's Fresh Air Fund give poor children a holiday at their farm house at Stiperden Bar. The Inspector of the National Association for the Prevention of Cruelty to Children has kept in touch with the school medical staff in connection with cases investigated by him. He has been particularly helpful in regard to children who have been persistently verminous and cases in which parents have neglected to have children's eye defects remedied, and where the school nurses have been unable, after repeated home visits, to persuade parents of the necessity for treatment.

BLIND, DEAF, DEFECTIVE AND EPILEPTIC CHILDREN.

Full statistical details regarding blind, deaf, defective and epileptic children will be found in Table 8.c.M., required by the Board of Education, in the Appendix.

All children in the Special Schools were medically and dentally inspected during the year.

Blind and Partially Sighted Children.—The Day School for the Blind, Tarleton House, serves a dual purpose. In addition to the special tuition given to blind children, there is held a special class for children with a high degree of myopia. There are obvious disadvantages in teaching children who

are not blind, but who have high degree of vision defect, in a school which is known as a "Blind" School, but the advantage of having the children taught by a staff skilled in sight-saving methods outweighs the disadvantages.

The number of children on the roll of the blind school and the special class for myopes on 31st December, 1934, are as follows:—

	Burnley	Children		om Areas of Authorities	Total
	Boys	Girls	Boys	Girls	
Blind Children (taught by Braille)	5	2	2	3	12
Class for Myopes (taught by partially sighted methods	2	11	2	_	15

One blind child of school age was in a residential institution for the blind.

Deaf Children.—At the end of 1934, there were 16 children receiving instruction in the Day School for the Deaf, 9 of whom were Burnley children, and 7 were from areas of adjoining authorities.

No. of Children on Register on 31st December, 1934	Burnley Children		Children from Areas of Adjoining Authorities		Total
	Boys	Girls	Boys	Girls	
(a) Totally Deaf Children (b) Children with Slight	5	2	2	3	12
Degree of Hearing		_	1		1
(c) Defective Speech, but not Deaf	1	1	1	_ ;	3

The children who, although not deaf, were taught in the Deaf School suffered from severe defects of speech and required special tuition in speech, which could be given only by the specially qualified teachers in the School for the Deaf.

The staff of the school consists of a head teacher and one assistant.

Two children were discharged from the Deaf School during 1934.

There are two after-care societies—the Burnley Oral Society and the Burnley and District Deaf Society. The former society, of which the head mistress of the Deaf School is secretary, assists children who leave the Deaf School to find employment, provides recreation and entertainment for deaf children, and helps in the oral education of deaf persons after they have left school. The latter society, in addition to providing recreation, religious instruction, etc., assists in finding employment for adult deaf persons.

During the last few years, the Burnley Oral Society found the following employment for children who left the Deaf School:—

In 1931, a boy was found work as a boot repairer and is now in regular employment. Another boy was assisted in obtaining work as a boot repairer, and is now in business for himself. A girl was helped to obtain admission to a trade training centre; another was helped to obtain work as a hairdresser and is now in business for herself. In 1932, work for a deaf girl was obtained in a slipper works. In 1933, boot repairing work was found for one boy, and another was sent to a trade training centre. Children are followed up after they leave school and encouraged to attend the evening class which is held in the Deaf School during the winter months.

Mentally Defective Children.—No alteration in the accommodation provided in the two special day schools was made during 1934. In the ascertainment of children for admission to these two schools, detailed examination of the mental capacity of the children is carried out in the presence of the parents before recommendations for admission are made. During 1934, a review of all the children in attendance in the special schools was made, and children with Intelligence Quotients of over 70 were assessed on educational attainments with a view to returning to elementary schools such of them as could obtain proper benefit from the education there. Of the 100 children in attendance at the end of the year, 76 were definitely feeble-minded, eight of these had multiple defects, six being cripples and two having severe heart disease. The remaining 24 children, although not certified as feeble-minded, had Intelligence Quotients varying from 67 to 80. They were children who for various reasons required some degree of individual attention, which could not be given in the ordinary classes of the elementary schools. Most of them had long absences or very irregular attendance in the infant schools, owing to ill-health, and when physically fit to resume regular attendance were found to lack the initial educational ground work of the infants school. After being observed closely for at least six months in the elementary school and found to make no progress, they were recommended for special individual tuition as dull and backward. Close observation is kept on these cases to ensure their return to elementary schools as soon as their educational progress justifies it.

Special Day Schools for Mentally Defective Children.

Total Children from adjoining Areas			9 4 N X
Total Burnley Children			110 18 28 100
chool	Children from adjoining Areas	Girls	
pecial S		Boys	
Coal Clough S _F	Burnley Children	Boys Girls Boys Girls Boys Girls	01 01
		Boys	63 7 16 54
Heasandford Special School Coal Clough Special School	Children from adjoining Areas	Girls	- co +
		Boys	र न श च
	ıley Iren	Boys Girls	29 6 29 29
Heasan	Heasandfor Burnley Children		16 5 6 15
			On Register December, 1933 Admitted during 1934 Discharged during 1934 On Register December, 1934

Classification of Burnley Children at end of 1934.

	Total	76 24
easandford Special School Coal Clough Special School	Girls	e3
	Boys	35 19
Heasandford Special School	Girls	24 5
	Boys	15
		: :
		: :
		Feeble-minded Dull and Backward

Eight of the Feeble-minded children have multiple defects.

28 children left the Special Schools during 1934, for the following reasons:—

	Boys.		Girls.
Reported to Local Authority for Mental			
Deficiency and admitted to an Institution			
for Mental Defectives	1	•••	-
Reached 16 years of age	4		1
Granted exemption before reaching 16 years			
of age, as suitable work obtained	7		2
Temporarily discharged on account of pro-			
longed ill-health			2
Transferred to other schools	10		1

Ineducable mentally defective children are supervised by the Central Lancashire Association for Mental Welfare. The following are particulars regarding Burnley children under 16 years of age:—

		Boys.		Girls.
Under Statutory Supervision	 	6	•••	2
In Public Assistance Institution	 	1		2

Two children under 16 years of age were in attendance at the Occupation Centre.

Higher Education of Blind Students.—The after-care of blind children is dealt with by the Special Services Sub-Committee of the Education Committee which also administers the Blind Persons Act, 1920. A scheme of training of blind students over 16 years of age is in operation at the Workshop for the Blind. Blind girls are trained in knitting by machinery, rug-making, matmaking, etc., and blind youths in basketry, boot repairing, cane-seating, etc.

Five Burnley and two County Technical Students are in training at the workshop. Two are being trained in basketry and five in knitting.

There are no courses established by the Education Authority for the higher education of deaf, physically defective, mentally defective or epileptic students.

PHYSICALLY DEFECTIVE CHILDREN.

Tuberculosis.—All cases of definite or suspected tuberculosis are referred to the Tuberculosis Officer, who arranges for appropriate treatment or supervision. Cases of crippling due to tuberculosis are referred to the Orthopædic Clinic. Arrangements are in operation through the Tuberculosis Dispensary Scheme for cases of tuberculous disease of the skin and glands to receive actino-therapy at the "Light" Department of the Municipal Hospital, where Mercury Vapour, Carbon Arc and Kromayer Lamps are available.

Delicate Children.—275 were classified as "delicate," of whom 115 were in attendance at the Open Air School.

The Public Health Committee again utilized the Burnley Joint Hospital Board's Smallpox Hospital at Crown Point as a convalescent institution for delicate children. The hospital was open for this purpose throughout the whole year, and seventy children received treatment.

The Day Open Air School.—No alteration in the accommodation or in the method of selection of children for admission was made during 1934.

		Boys.		Girls.		Total	
Admissions during 1934		14		23		37	
Discharges during 1934		14		15		29	
Average No. of Children on	the Roll	l	•••				127
8-	•••		•••	•••	•••	•••	112
Average Duration of Stay o	f those I	Dischar	ged—4	years	2 mon	ths.	
Average Gain in Weight si						$ed-26\cdot 2$	lbs
Average Gain in Weight per	Child d	uring tl	ne year	—6·3]	lbs.		
Reasons for Admission:—							
Tuberculous Diathe	esis					4	
Chronic Bronchitis						8	
Anæmia						2 .	
General Debility						15	
Rheumatism						1	
Heart Disease						5	
Arrested Non-Pulm	nonary T	`ubercu	losis			1	
Neurasthenia			•••			1	
						37	
						_	
Reasons for Discharge:—							
Reached School Le	aving A	ge				19	
Left Town						5	
Transferred to Eler	nentary	and Ce	ntral S	chools		4	
Transferred to Clas	s for My	opes	•••	•••	• • •	1	
						-	
						29	
						-	
	~ 1 1						

Nursery Classes in Elementary Schools.

Rosegrove Infants School, Nursery Class—17 children. Abel Street Infants School, Nursery Class—34 children.

The Nursery School:-

		Boys.	Girls.
No. on Register, January, 1934		63	 49
No. of Admissions during 1934		70	 54
No. transferred to ordinary Elementary	y.		
Schools during 1934		13	 11
No. ceased Attending for Other Reason	ıs	54	 34
No. on Register, December, 1934		66	 58

No. of Children who had a Routine Medical Inspection—105.

Age.	Num	bers Inspec	cted.
Age.	Boys.	Girls.	Total.
2 years	34	23	57
3 ,,	20	23	43
4 ,,	2	3	5

Defects Found.

	Uncleanliness							8
	Skin Defects							18
	Eye Defects	•••						9
	Ear Defects							7
	Nose and Throat	Defec	ts					29
	Enlarged Cervica	l Glan	ds	•••				6
	Speech Defects	•••						2
	Heart Defects	•••						2
	Bronchial Catarr	h	•••					13
	Nervous Disorde	rs		•••				3
	Rickets	•••		•••			•••	25
	Other Deformitie	es						4
	Other Defects ar	nd Dise	eases, e	excludi	ng Der	ntal De	fects	22
Special	Examinations					•••	•••	25

Of the 148 defects, 61 had been remedied before the end of the year. Dental inspection of the Nursery School Children was not carried out during 1934.

The Nursery School is now well established and has proved of immense value in providing for the pre-school children in the west side of the borough. The routine of the school is such that the children are given ample rest and a suitable diet and are taught table manners and personal hygiene. The interest of parents in the objects of the school and the welfare of the children has been maintained by well attended evening meetings of mothers and fathers. The school was kept open during the summer holiday period, with consequent benefit to the toddlers in attendance.

THE TREATMENT OF STAMMER.

In my report for 1933, I referred to the considerable number of children who were found to stammer, and that arrangements had been made for suitable classes to be held, organised according to age, sex and severity of the stammering defect. A full-time instructress, trained in the methods used in the London County Council Centres was appointed and took up duties in January, 1934. A class-room in the Deaf School was utilised as a Centre, at which children attended from the Elementary and Secondary Schools.

The children are examined by the Medical Officer before commencing remedial treatment for their speech defects and any physical defects are remedied. Thereafter, the instructress interviews each child and his parents, before the child attends the class.

I am indebted to Miss Knight, the special instructress, for the following report:—

"The interviews for the Remedial Treatment of Stammering commenced on Tuesday, January the 9th, 1934. The first list contained 120 cases for examination. Classes commenced on Thursday, February 8th. 87 children were admitted and were graded according to age, no child anywhere near school leaving age having to wait for admission. Each class is made up of from 7 to 10 children who attend twice each week, the duration of each class being one hour.

During the year 9 children have been discharged as cured and there has been no relapse in any of these cases; 8 children left school during the year, 5 of whom were so much improved it was not thought necessary for them to attend Evening Classes; 8 others who attained school leaving age have joined the Evening Classes; one child has been withdrawn from the classes; three children have left the district and 35 fresh cases have been admitted. During the year 8 children needing special attention were given continuous individual treatment.

The method of treatment is that inaugurated in the London County Council Clinics by Dr. E. J. Boome. The Clinic provides an adequate speech

atmosphere for stammerers. Consideration is given to the individual psychology of each case and to environmental difficulties. Homes are visited and parents are given every encouragement to come to the Clinic for help or to discuss their difficulties.

The chief aim of the lesson is relaxation which gives complete natural rest, reconditioning and developing control of the neuro-muscular system.

It is pleasing to note that along with the development of normal speech, other improvements naturally accrue, some of the reports from various schools have read:—

- '(a) His school work is much better and his general manner shows greater self-confidence.
 - (b) Shows a distinct gain in confidence and seems much happier.
 - (c) The stammer is better and there is a very marked improvement in his school work.
 - (d) Seems to be an absolute cure and quite ready to speak normally in class.'

In addition to the classes for stammerers, a class for the remedial treatment of cases of defective articulation was commenced in September, at which five children are under treatment.

Evening Classes were commenced on September 25th, these having a roll of 26 adult members. It is too early to report on the progress of the work in these classes, as yet.

It is hoped that it will be possible to hold fairly regular meetings for parents during 1935."

Dr. E. Catlow, Assistant School Medical Officer, reports as follows:—

"The children attending the centre for the treatment of stammer have been selected at all visits to schools over a period of 4 years. Any child giving a history of stammer, even if no stammer was evident at the interview, or who had a pronounced defect in articulation, was included in the list of possible candidates for remedial treatment. In some instances the degree of stammering was very difficult to assess as frequently children break down only under stress. Family and personal histories were recorded, and physical defects were remedied before the children commenced treatment at the remedial centre.

The instructress interviewed all those submitted and decided whether treatment was desirable. The few not accepted are still being watched at school in case of any further development.

Cases for discharge as cured must first satisfy the Instructress and also the Head Teacher as to complete recovery. Thereafter, the child and parent attend the School Clinic where all records are available. Here comprehensive tests in conversation, reading, recitation, taking messages, etc., are carried out. Discharge is then recommended only if the results of these tests are satisfactory.

Nine children were definitely discharged as cured in 1934. Two were almost cured but not prepared to stand alone and for these a short period of observation by the instructress was recommended. All other children in attendance at the speech centre are seen in their respective schools. I have been much impressed by the affection these children have for the centre. They insist on attending and have requested continuation of treatment during holidays. I think the atmosphere of quietness, relaxation, confidence and natural treatment of the child, without the suggestion of strain and apprehension usually adopted towards stammerers, assists them materially in overcoming their infirmities. They gain comfort and hope.

The children show increased self-confidence, a desire and willingness to speak, even if not completely successful, a brighter outlook, a more natural response to strangers, and a definite hope that they will be cured.

The willingness with which most Head Teachers present new cases and encourage attendance suggests that the work is widely appreciated."

SECONDARY SCHOOL.

High School for Girls.

Provided by the Authority. Average attendance—420.

Grammar School for Boys.

Provided, and Small Endowment. Average attendance—416.

Junior Commercial Department of Municipal College.

Day Classes for whole time scholars over the age of $13\frac{1}{2}$ years. Average attendance—46. Medical inspection was carried out for the first time in this Department in 1934. The figures are included with those of the two Secondary Schools.

Medical Inspection.

The following procedure was adopted during 1934:—

Secondary Schools for Boys and Girls.

- (a) Full Medical Inspection.
 - (1) All new admissions who had not been examined during the year at an elementary school.
 - (2) All new admissions from other areas.
 - (3) All pupils over 15 years.
 - (4) All older pupils who missed the 15 year old inspection in previous years.
- (b) General Survey.—All the remaining pupils.

Junior Commercial Department.—Routine inspection of all scholars.

Todmorden Road Central School and the Senior Class of St. Mary's R.C. School, which take pupils up to 15 years of age, are considered for medical inspection purposes as Elementary Schools, and Statistics of medical and dental inspection and treatment are included in those for Elementary Schools.

Secondary Schools.

ROUTINE MEDICAL INSPECTION. NUMBERS INSPECTED.

Ages	10	11	12	13	14	15	16	17	18	Total
Boys	4	41	81	96	116	76	27	14	8	463
Girls	5	40	79	120	129	56	24	11	7	471
Totals	9	81	160	216	245	132	51	25	15	934

	Full Routine Inspection.			General Survey.	Special Inspections.	
Boys		170	•••	293	 15	
Girls		169		302	 }	

Height and Weight.—Records of the Height and Weight of the pupils were made, and the following shows the averages for each age group.

Average Height and Weight of Secondary School Girls.

	1934	1934			Average Height.			Average Weight.		
	Number		1934		1933		1934		1933	
	Inspected.		inches.		inches.		lbs.		lbs.	
Age 10 years	 5		55.0				$64 \cdot 5$		_	
Age 11 years	 40		57.2		56.8		79.6		78.9	
Age 12 years	 79		58.0		$59 \cdot 1$		$82 \cdot 1$		88.9	
Age 13 years	 120		61.1		61.3		98.6		99.7	
Age 14 years	 129		$62 \cdot 8$		61.6		108.2		103.8	
Age 15 years	 56		$62 \cdot 9$		$62 \cdot 9$		111.4		110.9	
Age 16 years	 24		63.3		63.5		115.3		114.6	
Age 17 years	 11		64.6		63.7		$125 \cdot 2$		124.6	
Age 18 years	 7		64.7		62.0		131.8		100.0	

Average Height and Weight of Secondary School Boys.

Age 10 years	 4		52.0		53.0		67.5	 67.5
Age 11 years	 41		$55 \cdot 3$		55.6		74.6	 $75 \cdot 2$
Age 12 years	 81		56.7		57.2		77.3	 81.8
Age 13 years	 96		58.4		$59 \cdot 6$		84.8	 91.7
Age 14 years	 116		60.1		61.7		96.8	 102.4
Age 15 years	 76		$62 \cdot 9$	•••	$64 \cdot 3$		110.0	 115.7
Age 16 years	 27		64.9		66.9	• • •	119.7	 122.5
Age 17 years	 14		67.4	• • •	66.6		$122 \cdot 5$	 129.6
Age 18 years	 8	•••	67.5	•••	68.0		132.5	 133.8

MEDICAL INSPECTION AND TREATMENT.

Relatively few ailments of a major nature, apart from unhealthy tonsils and defective vision, have been found in the Secondary Schools. 242 (or 25.9%) of the pupils had defects, apart from uncleanliness and defective teeth, which required treatment.

None of the 14 cases of lesions of the skin were of a contagious nature. Chronic enlargement of the tonsils was found in 40 (or $4\cdot3\%$) of the pupils inspected, but in 12 cases only was treatment considered necessary. 2 pupils had tonsils and adenoids removed by operation.

A high percentage of Secondary School children are invariably found to have defective eyesight. During 1934, 214 (or 23%) of the pupils inspected had subnormal vision, of whom 149 were considered to require treatment, Of the 53 pupils who received treatment, 40 attended the Ophthalmic Clinic.

Although disordered action of the heart was present in 26 pupils, only 6 had an organic lesion. Tuberculous disease was entirely absent. The majority of the 60 pupils recorded as suffering from crippling defects and deformities were cases of postural defects, such as round shoulders and flat feet.

All the treatment clinics (minor ailments, dental, orthopædic and ophthalmic) are at the disposal of Secondary School pupils, whether paying or free place pupils. The arrangements for recovering the cost of treatment are the same as for children attending Elementary Schools. The majority of the defects were treated privately, the attendances at the clinic being mainly for treatment of dental and vision defects.

Owing to the inadequacy of the dental staff it has not hitherto been possible to provide dental inspection for the Secondary Schools. However, as an additional school dentist is now on the staff, arrangements have been made for dental inspection to be carried out in 1935. In the course of routine medical inspection, the medical officers found 421 pupils (45% of the whole) who required dental treatment, of whom 76 received treatment at the clinic.

Tables giving the numbers medically inspected, defects found and treatment given, as required by the Board of Education, are appended to this report.

The following are the Ophthalmic conditions for which Secondary School children were treated at the Eye Clinic:—

		N	ew Case	es. C	ld Cases.
Hypermetropia			1		_
Hypermetropic Astigma	atism		3		2
Mixed Astigmatism			_		14
Myopic Astigmatism			_		2
Myopia			4		8
Strabismus plus Hyperi	netropic				
Astigmatism					3
Strabismus plus Myopio					
Astigmatism					1
Not yet Classified	•••		1		1
	Total		9		31
			_		

Following up.—Written notices are sent to parents through the Principal of the school when defects requiring treatment are found. The Principals of the Secondary Schools assist by following up defects and reporting cases, when necessary, to the School Medical Officer. The school nurses visit the homes to interview parents in special cases.

Infectious Disease.—During the year no action was necessary beyond the exclusion of a few pupils and contacts.

MISCELLANEOUS.

Medical inspection or treatment of pupils attending the Municipal College and School of Art, as part-time students, and Evening Continuation Classes is not undertaken.

No pupils recommended for appointment as Student Teachers were referred to the School Medical Officer regarding physical fitness for appointment.

No children were submitted to the School Medical Officer for medical examination regarding fitness to take part in entertainments.

The School Medical Officer does not examine children under the Byelaws for Regulating the Employment of Children and Young Persons.

I am indebted to the Director of Education for the following information:—

Employment of Children out of School Hours in the Sale of Milk and Newspapers, etc. (Sections 5 and 7 of the Byelaws).

Occupations.		Number of Children Employed.
Sale or Delivery of Newspapers		133
Sale or Delivery of Milk		55
Carrying or Delivery of Food or Parcels		8
In connection with any Shop or Office		None.
In a Coal Yard		None.
In Industrial Work at Home		3 (Firewood).
In Agricultural Work		None.
In place of Public Entertainment	•••	1 (Variety Performer).

Licenses granted for street trading to young persons between the ages of 14 and 16—Boys, 4; Girls, none. Licenses refused, none. Licenses suspended or revoked, none.

Deaths of School Children.—There were 33 deaths of children between 5 and 15 years as follows:—

Diphtheria			 	 14
Scarlet Fever		•••	 	 3
Non-Pulmonary T	ubercu	losis	 	 2
Heart Disease			 	 1
Pneumonia			 	 3
Appendicitis		•••	 	 3
Accidental Death			 	 4
Other Causes			 	 3

Health Education.—Health talks to the scholars are not given by the Authority's Medical or Nursing Staff. Leaflets, provided by the Dental Board of the United Kingdom, dealing with the care of the teeth, are sent to the schools for distribution at the end of each term to children leaving school. It has not been possible to continue during 1934 the distribution to the schools of copies of the monthly journal "Better Health." The handbook of suggestions on Health Education issued by the Board of Education is used by the teachers in giving instruction in hygiene.

Charges of Treatment.—The scale of necessity applicable in recovering the cost of supplying spectacles, medical and dental treatment, orthopædic treatment, operative treatment for tonsils and adenoids, provision of meals and the provision of clogs through the clog fund were given in my report for 1931. (pages 78–81).

During 1934, £19 16s. 6d. was collected in payment of dental treatment, and £0 8s. 8d. for treatment of minor ailments.

APPENDICES.

BOARD OF EDUCATION.

ELEMENTARY SCHOOLS.

MEDICAL INSPECTION RETURNS, YEAR ENDED 31st DECEMBER, 1934.

Table I.—Return of Medical Inspections.

(a) ROUTINE MEDICAL	INSPE	CTIONS		
Number of Inspections in the Preso	cribed G	roups:	_	
Entrants				1,181
Second Age Group				1,169
Third Age Group			•••	1,207
	Total		=	3,557
Number of other Routine Inspection	ons			53
(b) Other Insp	ECTION	s.		
Number of Special Inspections				2,965
Number of Re-Inspections	•••	•••	•••	6,589
	Total			9,554

Table II. (A)—Return of Defects found by Medical Inspection in 1934.

No. of Defects		ROUTINE	Inspections	Special	INSPECTIONS
DEFECT OR DISEASE Requiring to be kept under observation, but not requiring Treatment Requiring to be kept under observation, but not requiring Treatment					
Skin—Ringworm: Scalp	DEFECT OR DISEASE	Requiring	Requiring to be kept under observation, but not requiring	Requiring Treat-	Requiring to be kept under obser- vation,
Body 2	Malnutrition Skin—Ringworm: Scalp	_			
Impetigo	Body		_		_
Other Diseases (Non-Tuberculous) 154 6 161 1 Eye: Blepharitis		_		0	
Eye: Blepharitis 15 2 30 — Conjunctivitis 6 — 35 1 Keratitis — — 4 — Corneal Opacities — 1 1 — — Defective Vision (excluding Squint) 208 235 349 9 Squint — 10 2 59 2 Ear: Defective Vision (excluding Squint) 10 2 59 2 Ear: Defective Hearing — 11 38 11 3 Other Conditions 11 38 11 3 3 1 Other Sar Diseases 9 8 77 5 5 131 2 2 Nose and Throat: Chronic Tonsilitis only 94 427 95 44 Adenoids only 18 20 3 1 4 Adenoids only 18 20 3 1 4 27 95 44 </td <td></td> <td></td> <td></td> <td></td> <td></td>					
Conjunctivitis Conjunctivitis Corneal Opacities Corneal Op					1
Keratitis					
Corneal Opacities		_	_		
Defective Vision (excluding Squint) 208 Squint		1	1		_
Other Conditions 10 2 59 2 Ear: Defective Hearing 11 38 11 3 Ottitis Media 23 5 131 2 Other Ear Diseases 9 8 77 5 Nose and Throat: Chronic Tonsilitis only 94 427 95 44 Adenoids only 18 20 3 1 Chronic Tonsilitis & Aden'ds. 14 7 9 — Chronic Tonsilitis & Aden'ds. 14 7 9 — Other Conditions 38 37 108 5 Enlarged Cervical Glands (Non-Tuberculous) 20 54 57 6 Defective Speech 62 12 32 5 Heart and Circulation: 62 12 32 5 Heart Disease: Organic 16 8 23 — Fuart and Circulation: 1 58 18 8 Anaemia 21 36 37 2		208	235	0 - 0	9
Ear: Defective Hearing 11 38 11 3 Otitis Media 23 5 131 2 Other Ear Diseases 9 8 77 5 Nose and Throat: Chronic Tonsilitis only 94 427 95 44 Adenoids only 18 20 3 1 Chronic Tonsilitis & Aden'ds. 14 7 9 — Other Conditions 38 37 108 5 Enlarged Cervical Glands (Non-Tuberculous) 20 54 57 6 Defective Speech 62 12 32 5 Heart and Circulation: 62 12 32 5 Heart Disease: Organic 16 8 23 — Heart Disease: Organic 16 8 23 — Heart Disease: Organic 16 8 23 — Tuberculosis: 1 5 18 8 8 Anaemia 2 2 80					_
Ottitis Media 23 5 131 2 Other Ear Diseases 9 8 77 5 Nose and Throat: Chronic Tonsilitis only 18 20 3 1 Chronic Tonsilitis & Aden'ds. 14 7 9 Other Conditions 38 37 108 5 Enlarged Cervical Glands (Non-Tuberculous) 20 54 57 6 Defective Speech 62 12 32 5 Heart and Circulation: 62 12 32 5 Heart Disease: Organic 16 8 23 Heart Disease: Organic 10 4 29 1 Lungs: Bronchitis 10 4 29 1 Other Non-Tuberculous Diseases 72 80 49 2 Tuberculosis:			_		
Other Ear Diseases 9 8 77 5 Nose and Throat: Chronic Tonsilitis only 94 427 95 44 Adenoids only 18 20 3 1 Chronic Tonsilitis & Aden'ds. 14 7 9 — Other Conditions 38 37 108 5 Enlarged Cervical Glands (Non-Tuberculous) 20 54 57 6 Defective Speech 62 12 32 5 Heart and Circulation: 62 12 32 5 Heart Disease: Organic 16 8 23 — Functional 1 58 18 8 Anaemia 21 36 37 2 Lungs: Bronchitis 10 4 29 1 Other Non-Tuberculous Diseases 72 80 49 2 Tuberculosis: <					
Nose and Throat: Chronic Tonsilitis only	0 11 11 11 11 11 11 11 11 11 11 11 11 11				
Adenoids only			_		
Chronic Tonsilitis & Aden'ds. Other Conditions 14 7 9 — Other Conditions 38 37 108 5 Enlarged Cervical Glands (Non-Tuberculous) 20 54 57 6 Defective Speech 62 12 32 5 Heart and Circulation: 16 8 23 — Heart Disease: Organic 1 58 18 8 Anaemia 21 36 37 2 Lungs: Bronchitis 10 4 29 1 Other Non-Tuberculous Diseases 72 80 49 2 Tuberculosis: <td< td=""><td></td><td></td><td></td><td></td><td></td></td<>					
Enlarged Cervical Glands (Non-Tuberculous) 20 54 57 6 Defective Speech 62 12 32 5 Heart and Circulation: 16 8 23 — Functional 1 58 18 8 Anaemia 21 36 37 2 Lungs: Bronchitis 10 4 29 1 Other Non-Tuberculous Diseases 72 80 49 2 Tuberculosis: 72 80 49 2 Tuberculosis: — — — — Pulmonary: Definite — — — — Suspected — — — — Non-Pulmonary: Glands 5 — 2 — Skin — — — — Other Forms 3 1 — — — Nervous System: Epilepsy 1 —				-	
Defective Speech	Other Conditions	38	37	108	5
Heart and Circulation:					
Heart Disease: Organic 16		62	12	32	5
Functional				20	
Anaemia	p ~				
Lungs: Bronchitis 10 4 29 1 Other Non-Tuberculous Diseases 72 80 49 2 Tuberculosis: <td< td=""><td></td><td></td><td></td><td></td><td></td></td<>					
Other Non-Tuberculous Diseases 72 80 49 2 Tuberculosis: Pulmonary: Definite — <td></td> <td></td> <td></td> <td></td> <td></td>					
Tuberculosis: Pulmonary: Definite —	0/1 N M 1 1 D'		_		
Non-Pulmonary: Glands					
Non-Pulmonary: Glands	Pulmonary: Definite		_	_	
Bones and Joints Skin Skin Cher Forms Skin Ski	Suspected	_	_	_	_
Skin <td></td> <td></td> <td>_</td> <td>2</td> <td></td>			_	2	
Other Forms 3 1 —		b		_	
Nervous System: Epilepsy Chorea	0.1. 7	- 3	1		
Chorea — — — 13 — Other Conditions 6 43 28 4 Deformities: Rickets 15 3 3 — Spinal Curvature 12 1 — — Other Forms 102 62 34 2 Other Defects and Diseases (excluding Uncleanliness and Dental Diseases) 141 159 1069 51			1	8	
Other Conditions 6 43 28 4 Deformities: Rickets 15 3 3 — Spinal Curvature 12 1 — — Other Forms 102 62 34 2 Other Defects and Diseases (excluding Uncleanliness and Dental Diseases) 141 159 1069 51	of t			1	-
Spinal Curvature 12 1 — — — Other Forms 102 62 34 2 Other Defects and Diseases (excluding Uncleanliness and Dental Diseases) 141 159 1069 51	0.1 0 1.1	6	43	28	4
Other Forms 102 62 34 2 Other Defects and Diseases (excluding Unclean- liness and Dental Diseases) 141 159 1069 51				3	_
Other Defects and Diseases (excluding Unclean-liness and Dental Diseases) 141 159 1069 51			_	-	-
liness and Dental Diseases) 141 159 1069 51		102	62	34	2
and believe the second of the		141	150	1069	51
Totals 1191 1323 2722 154	intess and Dental Diseases)	171	100	1003	-
10140111 111 1111	Totals	1191	1323	2722	154

(B)—Number of Individual Children found at Routine Medical Inspection to Require Treatment (excluding Uncleanliness and Dental Diseases).

			Number of Children			
		Inspected	Found to require Treatment	Children found to require Treatment		
	•••	1181	372	31.5%		
	•••	1169	318	27.2%		
		1207	303	25·1%		
		3557	993	27.9%		
		53	15	28.3%		
		3610	1008	27.9%		
			1181 1169 1207 3557 53	Inspected Found to require Treatment 1181 372 1169 318 1207 303 3557 993 53 15		

Table III.—Return of all Exceptional Children in the Area. CHILDREN SUFFERING FROM MULTIPLE DEFECTS.										
FEEBLE-MINDED AND CRIPPLE. Boys Girls Total										
Attending Child		ed Scho	ools for 	Menta:	lly Def	ective •	. 4	4	2	6
TOTALLY DEA										•
Attending					nildren	•••		•	1	1
Severe Hear Attending								_	1	1
FEEBLE-MIND			J			•••				
Attending	g Certifi					ective				
Chile	lren	•••	•••	•••	•••	•••	•••	1	1	2
					Total		!	5	5	10
BLIND CHILD	REN.									
At Cer Schoo the F	ls for	At Pu Elemen Scho	ntary	At O Institu		At no S	r	То	otal	
	7				l		-	5	3	
PARTIALLY B	LIND C	HILDRE	N.							
At Certified Schools for the Blind	At Cer School the Par Blin	ls for rtially	At P	ntary		Other cutions		Scho or itution	- 1	Total
13 — — — — 13									13	
Deaf Children.										
At Certified At Public At no School Schools for Elementary At Other the Deaf Schools Institution At no School Institution										
	5								5	

Table III.—Return of all Exceptional Children in the Area.—continued.

PARTIALLY DEAF CHILDREN.

At Certified Schools for the Deaf	At Certified Schools for the Partially Deaf	At Public Elementary Schools	At Other Institutions	At no School or Institution	Total
I	_	-	_	_	I

MENTALLY DEFECTIVE CHILDREN.

FEEBLE-MINDED CHILDREN.

At Certified Schools for Mentally Defective Children	At Public Elementary Schools	At Other Institutions	At no School or Institution	Total
69	_	_	_	69

EPILEPTIC CHILDREN.

CHILDREN SUFFERING FROM SEVERE EPILEPSY.

At Certified Special Schools	At Public Elementary Schools	At Other Institutions	At no School or Institution	Total
I	4*	I	4	10

^{*} Fits infrequent. Children conducted to and from school.

Physically Defective Children.

A.—Tuberculous Children.

I.—Children Suffering from Pulmonary Tuberculosis.

At Certified Special Schools	At Public Elementary Schools	At Other Institutions	At no School or Institution	Total
_	2*	3	_	5

^{*} Not a source of infection to others.

Table III.—Return of all Exceptional Children in the Area.—continued.

II.—Children Suffering from Non-Pulmonary Tuberculosis.

At Certified Special Schools	At Public Elementary Schools	At Other Institutions	At no School or Institution	Total
10	38		2	50

B.—Delicate Children.

At Certified Special Schools	At Public Elementary Schools	At Other Institutions	At no School or Institution	Total
115	139	21	-	275

C.—CRIPPLED CHILDREN.

Certified Special Schools	At Public Elementary Schools	At Other Institutions	At no School or Institution	Total
3	26	_	-	29

D.—CHILDREN WITH HEART DISEASE.

At Certified Special Schools	Special Elementary		At no School or Institution	Total
6	61		_	67

Number of Children Notified during the Year 1934, by Local Education Authority to the Local Mental Deficiency Authority.

1. (i) Children incapable of receiving benefit or further benefit from instruction in a Special School:	
from instruction in a Special School:	
() 771	
(a) Idiots 2	
(b) Imbeciles 1	
(c) Others —	_
(ii) Children unable to be instructed in a Special School without	
(ii) Children unable to be instructed in a Special School without detriment to the interests of other children:	
() 35 1 5 6 4	
(b) Others	1
(b) Others	
2. Feeble-minded children notified on leaving a Special School on	
or before attaining the age of 16	_
3. Feeble-minded children notified under Article 3, i.e., "Special	
Circumstances " cases	
4. Children who in addition to being mentally defective were	
Blind or Deaf	
Grand Total 3	-

Table IV.—Return of Defects Treated during the Year ended 31st December, 1934.

ELEMENTARY SCHOOLS.—TREATMENT TABLE.

GROUP I.—MINOR AILMENTS (EXCLUDING UNCLEANLINESS, FOR WHICH SEE GROUP VI).

	Number of Defects treated, or under treatment during the year.					
Disease or Defect.	Under the Authority's Scheme.	Otherwise.	Total.			
Skin: Ringworm—Scalp.						
(i) X-Ray Treatment (ii) Other Treatment	7	_	$\frac{7}{10}$			
Ringworm—Body	28	_	28			
Scabies	8	1	9			
Impetigo	153	17	170			
Other Skin Diseases	99	106	205			
Minor Eye Defects (external and other, but excluding cases falling in Group II.)	108	50	158			
Minor Ear Defects	192	44	236			
Miscellaneous (e.g., Minor injuries, bruises, sores, chilblains, etc.)	729	123	852			
Total	1334	341	1675			

GROUP II.—DEFECTIVE VISION AND SQUINT (EXCLUDING MINOR EYE DEFECTS TREATED AS MINOR AILMENTS—GROUP I).

	No. of De	No. of Children for whom Spectacles were					
Defect or Disease.	Under the Authority's Scheme.	Otherwise	Total	Under the Author- ity's Scheme.	Otherwise.	Under the Authority's Scheme.	Otherwise.
Errors of Refraction (including squint). (Operations for squint should be recorded separately in the body of the School Medical Officer's Report) Other Defects or Disease of the Eyes (excluding those recorded in Group I)	(a) 1063 —	16	1079	(b)732	16	360	(c)409
Total	(a) 1063	16	1079				

Includes 601, who previously wore glasses and were retested.

Includes 361, who previously wore glasses and were given fresh prescriptions to have glasses changed. Includes results of some children who had prescriptions given in the previous year, but did not obtain glasses until 1934.

GROUP III.—TREATMENT OF DEFECTS OF NOSE AND THROAT.

	NUMBER OF DEFECTS.												
	Received Operative Treatment.												
Jnder the Authority's Scheme, in Clinic or Hospital or Hospital Scheme. By Private Practitioner or Hospital, apart from the Authority's Scheme.			Total.				Received other forms of Treatment.	Total number treated.					
i)	(ii)	(iii)	(iv)	(i)	(ii)	(iii)	(iv)	(i)	(ii)	(iii)	(iv)		
3	_	72	-	-	_	140		3		212		153	368

i) Tonsils only. (ii) Adenoids only. (iii) Tonsils and Adenoids. (iv) Other Defects of the Nose and Throat.

Table IV.—continued. GROUP IV.—ORTHOPÆDIC AND POSTURAL DEFECTS.

	Under	the Authority	r's Scheme.	Otherwise.				
i	Residential treatment with education.	Residential treatment without education.	Non-residential treatment at an orthopædic clinic.	Residential treatment with education.	Residential treatment without education.	Non-residential treatment at an orthopædic clinic.	Total numbe treated	
umber of ildren treated	12	_	*403		_	_	415	

^{*} In addition breathing exercises were given to 152 children after operations for tonsils and adenoids.

GROUP V.—DENTAL DEFECTS.

(1)	Number of children who werc—			
	(a) Inspected by the Dentist:			
	Routine Age Groups $ \begin{pmatrix} \text{Aged 5} & \dots & - \\ ,, & 6 & \dots & 647 \\ ,, & 7 & \dots & 648 \\ ,, & 8 & \dots & 660 \\ ,, & 9 & \dots & 638 \\ ,, & 10 & \dots & 688 \\ ,, & 11 & \dots & 636 \\ ,, & 12 & \dots & 741 \\ ,, & 13 & \dots & 536 \\ ,, & 14 & \dots & 100 \end{pmatrix} $	Total		5,294
	Specials			2,013
	Grand Total			$\frac{2,013}{7,307}$
		6,527		
	(c) Actually treated	4,250		
(2)	(c) Actually treated 1 Half-days devoted to 1 Inspection 1 Treatment 1 Half-days made by children for treatment	Total		512
(3)	Attendances made by children for treatment			7,105
(4)	Attendances made by children for treatment Fillings $\left\{\begin{array}{ccc} \text{Permanent Teeth} & 3,144 \\ \text{Temporary Teeth} & 553 \end{array}\right\}$	Total		3,697
(5)	Extractions $\left\{\begin{array}{ll} \text{Permanent Teeth} & 909 \\ \text{Temporary Teeth} & \textbf{3,826} \end{array}\right\}$	Total		
(6)	Administration of General Anæsthetics for Extractions			90
(7)	Other Operations $\left\{ egin{array}{ll} ext{Permanent Teeth} & 656 \\ ext{Temporary Teeth} & 289 \end{array} \right\}$	Total		210
(1)	Temporary Teeth 289	Total	•••	040

	GROUP VI.—UNCLEANLINESS AND	VERM	inous (Conditi	ONS.	
(1)	Average number of visits per school mass School Nurses	ade dur 	ing the 	year by	y the	4
(2)	Total number of examinations of child School Nurses	lren in 	the scl	nools by 	the	43,651
(3)	Number of individual children found un	nclean				500
(4)	Number of children cleansed under a Local Education Authority	rrangen 	nents n	nade by 	the	42
(5)	Number of cases in which legal proceed	ings we	re take:	n—		
	(a) Under the Education Act, 192	1		•••		
	(b) Under School Attendance Bye	laws		•••		-
ME	SECONDARY S EDICAL INSPECTION RETURNS, YEAR Table I.—Return of Med (a) ROUTINE MEDICAL Number of Inspections in the Prese	R ENDI	ED 31st	ns.	MBER	, 1934.
	Entrants				_	
	Second Age Group	•••				
	Third Age Group	•••	•••	•••	_	
		Total		•••		
	Number of other Routine Inspection	ons			934	
	(b) Other Insp.	ECTIONS	5.			
	Number of Special Inspections	ECTIONS	·		15	
		ECTIONS 	 		15 3	
	Number of Special Inspections	ECTIONS Total	···			

Table II. (A)—Return of Defects found by Medical Inspection in 1934.

No. of Defects No. of Defects Requiring to be Requiring to be		ROUTINE	Inspections	SPECIAL	Inspections	
Requiring observation, observation, but not requiring Treatment Treatment		ļ			No. of Defects	
Skin—Ringworm: Scalp	DEFECT OR DISEASE		kept under observation, but not requiring	Treat-	to be kept under obser- vation, but not requiring	
Scabies		7	_	_		
Scabies		4	_	_	_	
Impetigo		1				
Other Diseases (Non-Tuberculous) 12 2 Eye: Blepharitis 1 Conjunctivitis Keratitis Corneal Opacities Defective Vision (excluding Squint) 149 64 Squint 1 Other Conditions 2 Ear: Defective Hearing 1 Other Ear Diseases 1 1 Other Ear Diseases 1 1 Other Ear Diseases 1 1 Nose and Throat: Chronic Tonsilitis only 12 28			_			
Conjunctivitis Reratitis Corneal Opacities Corneal Opaciti			2	_		
Keratitis	Eye: Blepharitis		1	_		
Corneal Opacities		—		_		
Defective Vision (excluding Squint) 149			_	_	_	
Squint			64			
Other Conditions						
Ear: Defective Hearing Otitis Media	eñ a nu				_	
Other Ear Diseases 1 1 — — Nose and Throat: Chronic Tonsilitis only 12 28 — — Adenoids only — — — — — Chronic Tonsilitis & Aden'ds — <td< td=""><td></td><td> 1</td><td>_</td><td>_</td><td></td></td<>		1	_	_		
Nose and Throat: Chronic Tonsilitis only			_	_	_	
Adenoids only			_	_	_	
Chronic Tonsilitis & Aden'ds			28	_	_	
Other Conditions			_			
Enlarged Cervical Glands (Non-Tuberculous) Defective Speech			1			
Defective Speech			_			
Heart Disease: Organic 6		//	_	_ 1		
Functional 1 13 2	Heart and Circulation:			12		
Anaemia					_	
Lungs: Bronchitis <td></td> <td>9</td> <td></td> <td></td> <td>1 -</td>		9			1 -	
Other Non-Tuberculous Diseases — 4 — — Tuberculosis: — — — — — Pulmonary: Definite — — — — — Suspected — — — — — Non-Pulmonary: Glands — — — — — Bones and Joints — </td <td></td> <td></td> <td>2</td> <td></td> <td></td>			2			
Tuberculosis: Pulmonary: Definite	Other Non-Tuberculous Diseases		4			
Pulmonary: Definite <			•			
Non-Pulmonary: Glands			_	_		
Bones and Joints			-			
Skin			_			
Other Forms — — — — Nervous System: Epilepsy — — — — — Chorea — — — — — Other Conditions 2 3 — — Deformities: Rickets 1 — — — Spinal Curvature 4 — — — — Other Forms 41 14 — — — Other Defects and Diseases (excluding Uncleanliness and Dental Diseases) 21 8 — —						
Nervous System: Epilepsy <td< td=""><td>0.12</td><td></td><td></td><td></td><td></td></td<>	0.12					
Chorea		1	_		_	
Other Conditions 2 3 — — — — — — — — — — — — — — — — — —			_		-	
Spinal Curvature 4 — — — — — — Other Forms 41 14 — — — — — — — Other Defects and Diseases (excluding Unclean-liness and Dental Diseases) 21 8 — —			3	_	-	
Other Forms 41 14 — — Other Defects and Diseases (excluding Unclean- liness and Dental Diseases) 21 8 — —			_			
Other Defects and Diseases (excluding Unclean- liness and Dental Diseases) 21 8 — —	of a sp	4.1	14	_	_	
liness and Dental Diseases) 21 8			14			
Totals 267 158 — —		0.1	8	- 1	-	
	Totals	. 267	158			

(B)—Number of Individual Children found at Routine Medical Inspection to Require Treatment (excluding Uncleanliness and Dental Diseases).

		Number	Percentage of Children found	
GROUP		Inspected	Found to require Treatment	to require Treatment
Prescribed Groups: Entrants	 	_	}	
Second Age Group	 			_
Third Age Group	 	-	-	
Total (Prescribed Groups)	 		_	_
Other Routine Inspections	 	934	242	25.9%

Table IV.—Return of Defects Treated during the Year ended 31st December, 1934. SECONDARY SCHOOLS.—TREATMENT TABLE.

GROUP I.—MINOR AILMENTS (EXCLUDING UNCLEANLINESS, FOR WHICH SEE GROUP VI).

						Defects treate ent during the	
Disease or	Defe	ct	Under the Authority's Scheme	Otherwise	Total		
SKIN: Ringworm—Scalp.							
(i) X-Ray Treatm	ent						_
(ii) Other Treatme				!	_		_
Ringworm—Body					_		_
Scabies					_		
Impetigo						- 1	
Other skin disease	• • • •	•••	•••			3	3
MINOR EYE DEFECTS (External and other, falling in Group II.)		 exclu	 ding c	ases	· –	-	
MINOR EAR DEFECTS					I	1	2
MISCELLANEOUS (e.g., minor injuries, chilblains, etc.)	 bruis	es, so	res,		_	2	2
Total					1	6	7

GROUP II.—DEFECTIVE VISION AND SQUINT (EXCLUDING MINOR EYE DEFECTS TREATED AS MINOR AILMENTS—GROUP I.)

	No.	No. of Children for whom Spectacle:						
Defect or Disease.	Under the Authority's Scheme.	By Private Practitioner or at Hospital, apart from the Authority's Scheme.	Otherwisc	Total	Under the Anthority's Scheme.	Otherwise.	Under the Authority's Scheme.	other wise.
Errors of Refraction (including squint). (Operations for squint should be recorded separately in the body of the School Medical Officer's Report)	(a)·10	_	13	53	(b)27	13	4	(c)39
Other Defects or Disease of the Eyes (excluding those recorded in Group I)	_		-	-				
Total	(a)40		13	53				

- (a) Includes 31, who previously wore glasses and were retested.
- (b) Includes 19, who previously wore glasses and were given fresh prescriptions to have glasses changed.
- (c) Includes results of some children who had prescriptions given in the previous year, but did not obtain glasses until 1934.

GROUP III.—TREATMENT OF DEFECTS OF NOSE AND THROAT.

						NUN	IBER (JF DE	FECIS). 			
	Received Operative Treatment.										6		
	Under the Authority's Scheme, in Clinic or Hospital			By Private Practitioner or Hospital, apart from the Authority's Scheme.			Total.				Received other forms of Treatment.	Total number treated.	
(i)	(ii)	(iii)	(iv)	(i)	(ii)	(iii)	(iv)	(i)	(ii)	(iii)	(iv)		
_	_	1	_	-		1	_	_	-	2	_	2	4

⁽i) Tonsils only. (ii) Adenoids only. (iii) Tonsils and Adenoids. (iv) Other Defects of the Nose and Throat.

Table IV.—continued.

GROUP IV.—ORTHOPÆDIC AND POSTURAL DEFECTS.

	Under	the Authority	's Scheme.	Otherwise.					
	Residential treatment with education.	Residential treatment without education.	Non-residential treatment at an orthopædic clinic.	Residential treatment with education.	Residential treatment without education.	Non-residential treatment at an orthopædic clinic.	Total numbe treated		
er of n treated	_	_	9	_	_	_	9		
(1)		GROUD	Dentist:	ed 5 — 6 — 7 — 8 — 9 — 11 — 12 — 13 — 14 —	Total	. —	,		
				Gr	and Total	76			
		Found to requi Actually treate				76 76			
(2)	Half-days d			spection - eatment - ary Return).	Total	–			
(3)	Attendances	·	dren for treatmen	•		142			
(4)	Fillings .		Permaner		$\begin{pmatrix} 20 \\ 2 \end{pmatrix}$ Total	122			
(5)	Extractions		Permaner		$\left.\begin{array}{c} 33 \\ 14 \end{array}\right) ext{Total}$	47			
(6)	Administrat	ions of genera	l anæsthetics for	extractions		6			
(7)	Other Opera	ations	 Permaner Temporar		$\begin{pmatrix} 23 \\ 2 \end{pmatrix}$ Total	25			
(2) T (3) N (4) N	overage number Total number Tumber of indi Tumber of chil Authorit Tumber of case (a) Und	er of visits per of examination of examination of the decident of the control of	ANLINESS AND school made dur ons of children in found unclean under arrangeme	ing the year b n the Schools ents made by t	by the School I s by School I	Nurses Nurses			

APPENDIX II.

Table showing the Physical Condition of Children Examined at Routine Medical Inspection during 1934.

	ELEMENTARY SCHOOLS.					Second-		
Disease or Defect.		En- trants	Inter- mediates	Leavers	Other Ages	Specials	ary Pupils	Total
Number of Children Examined		1181	1169	1207	53	161	934	4705
Malnutrition	. ,	11	8	4	1		1	25
Uncleanliness: Head		76	88	73	4	4	4	249
Body		5	4	11	_	2	1	23
Clothing		1	1	3	_	_	_	5
Defective Clothing and Footgear		lõ	19	15		2		51
Ringworm Head						1		1
Body		2						2
Scabies			2	_		2	_	4
Impetigo		11	5	4	_	2	_	22
Other Skin Diseases		71	46	41	2	17	14	191
Eye:		-						
Blepharitis		7 4	7	2	1 1	1	1	19
Conjunctivitis Keratitis					1	4		10
Corneal Opacities		$-\frac{2}{2}$						2
Corneal Ulcers								
Defective Vision		9	234	190	10	34	213	6 90
Squint		42	5	15	2	6	1	71
Other Conditions		6	3	3		2	2	16
EAR:								
Defective Hearing		19	13	16	1	3	1	53
Otitis Media Other Conditions		$\frac{12}{10}$	4	$\frac{12}{2}$	_		$\frac{2}{2}$	30
Nose and Throat:	• •••	10	5	Z		2	2	21
Chronic Tonsilitis only		264	149	103	5	8	40	569
Adenoids only		26	11	1		$\frac{3}{2}$		40
Chronic Tonsilitis and Adenoic		16	5					21
Other Conditions		38	27	8	2	7	4	86
Enlarged Cervical Glands		56	14	4			15	89
Defective Speech		16	16	41	1	6	6	86
Defective Teeth HEART AND CIRCULATION—		776	919	650	27	2	421	2793
Harris Diagram Com to		8	9	6	1		6	30
Functional		15	24	18	2	1	14	74
Anæmia			23	14	ī	l i	5	63
Lungs—Bronchitis			4	3	1	<u> </u>		14
Others (Non-Tub.)		93	36	21	2	1	4	157
TUBERCULOSIS								
Pulmonary: Definite							_	
Suspected				<u> </u>			_	
Non-Pulmonary: Glands Spine		4		_ l				5 2
Hip				1				ĩ
Bones and J				$\frac{1}{2}$	_		_	2
Skin		-	-	_		_		_
Other Forms	·	3		1		_	_	4
NERVOUS SYSTEM—			i					
Epilepsy Minor		1 —	_	I -,		1		1
Major Other Nervous Conditions		27	12	10		4	5	$\frac{1}{58}$
Mentally Deficient								
Chorea				_			_	
DEFORMITIES-								
Rickets		14	4	-	-		1	19
Spinal Curvature		1	2	10	1		4	17
Other Forms		13	67	80	4	3	55	222
OTHER DEFECTS AND DISEASES		114	96	88	2	, 50	29	379
Тотац	.s	1814	1862	1455	70	168	851	6220
No. of individual children havin	ნ			1.00			301	0220
defects		1046	1049	924	42	151	616	3828

APPENDIX III.

Table showing Number of Children Examined at each Elementary School.

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School.	Entrants	Inter- mediates	Leavers	Other Ages	Special Cases	Totals
Abel Street	61	58	68	1	23	211
Back Lane	17	13	14	_	1	45
Burnley Wood	66	72	101	6	5	250
Coal Clough	69	81	74	2	14	240
Fulledge	56	8	_	_	2	66
Habergham	22	21	12	1	2	58
Healey Wood	24	27	10	_		61
Hargher Clough	49	64	10	2	6	131
Heasandford	54	70	66	5	11	206
Lane Head	18	25	33	6	1	83
Lionel Street	57	50	106	3	3	219
Pickup Croft	22	6		_	_	28
Red Lion Street	_	35	36	2	1	74
Rosegrove	63	64	55	3	12	197
Rose Hill	57	19	-		2	78
St. Andrew's	36	28	45	3	8	120
St. Augustine's	3	13	5	_	_	21
St. John's (Ivy St.)	44	47	47	1	3	142
St. Mary's	68	96	132	5	10	311
St. Mary Magdalene's	52	47	52	3	6	160
St. Peter's	46	31	44	-	3	124
St. Stephen's	39	17	33		2	91
St. Thomas's	35	32	-	2	2	71
Stoneyholme	91	75	84	2	19	271
Todmorden Road		45	60	3	7	115
Holy Trinity	83	37	47	1	8	176
Sandygate	_	29	45	2	1	77
Whittlefield	25	37	_		3	65
Wood Top	24	22	28		6	80
Totals	1181	1169	1207	53	161	3771

